

Knowing your trends to create

a better future

Annual Review for City of Manchester
December 8, 2020

Anthem Blue Cross Blue Shield (Local BCBS)





Anthem

- **Mladen Varagic**
Account Manager
- **Maria Proulx**
RVP, Sales
- **Stefanie Pike RN, BSN**
Health Information Manager
- **Anne Ajayi**
Sr. Pharmacy Account Manager
- **Stephanie Ceccherini**
Health and Wellness Program Manager

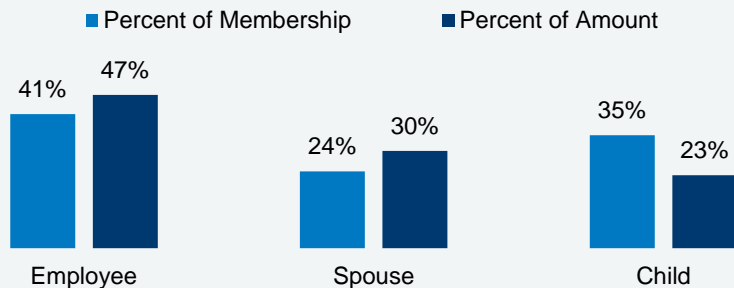
Demographics and Reporting Parameters

Reporting Periods	<p>Medical Utilization Financials</p> <p>Paid during the following periods -</p> <p>Current Period - July 2019 through June 2020</p> <p>Compared to Prior Period - July 2018 through June 2019</p> <p>Segment- Total Account</p>
PMPM	<p>Members are defined as plan eligible Employees/Subscribers, Spouse/Partner and Dependents</p> <p>PMPM paid amount is the metric used throughout this analysis to understand paid amount trends by individual plan participants (per member) over the duration of the plan period (per month)</p>
High Cost Claimants	<p>High cost claimants (HCCs) are referenced in this analysis and are defined as those members with a cumulative total paid amount of medical claims \geq \$75,000 during the current reporting period</p> <p>HCC PMPM</p> <p>Per Member Per Month cost of Members with paid claims \geq \$75K</p> <p>Non-HCC PMPM</p> <p>Per Member Per Month cost of Members with paid claims $<$ \$75K</p>
Settings	<p>Plan expenditures and utilization are broken down into the following settings:</p> <p>Inpatient facility, Outpatient facility, Professional and Anthem's Pharmacy</p>
Benchmark(s)	<p>The Anthem Book of Business Benchmark is utilized unless noted. The Custom Benchmark is comprised of the ANTHEM BOOK OF BUSINESS .</p>

Membership

- › Current membership 2,875 (2,927 prior)
- › The membership decreased 1.6%
- › Average contract size was 2.4
- › Females 47% / Males 53%
- › Average Member age 36 / Employee age 47
- › Employee consumes 47% of medical plan costs
- › PMPM: Employee: \$505.93; Spouse: \$562.46; Child: \$286.40

Membership And Paid Amount By Relationship



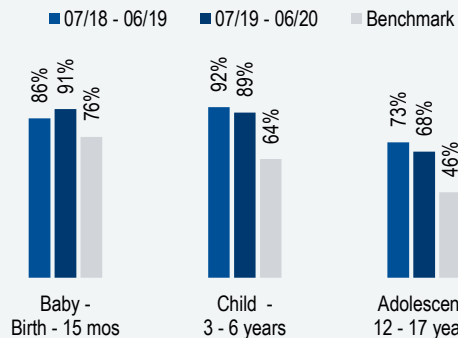
Health Status Distribution

- › Health Risk Score was 1.46 / Trend ↑1.3%
- › 58% of members were identified as healthy
- › 52% of adult members had a wellness exam
- › There are **220 total unique members** who were continuously enrolled did not file a medical claim during this time period

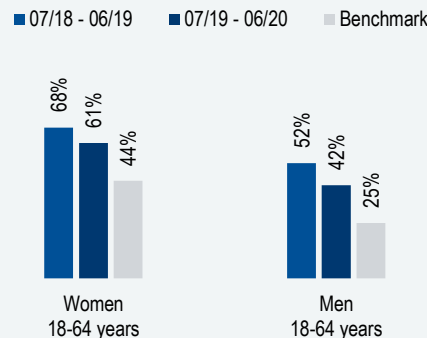
Distribution of Health Status

	Healthy	At Risk	Chronic	Critical
2018	56.4%	7.1%	34.0%	2.6%
2019	58.2%	6.0%	33.6%	2.1%
Change	+3%	-15%	-2%	-19%

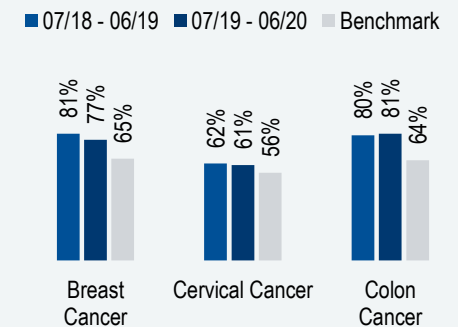
Children: Well Visits



Adult: Well Visits 18-64 Years



Adult Cancer Screening Rates



Executive Overview

Total paid medical claims = \$15,274,346 (6.7% decrease from the prior period)



Medical PMPM

\$442.70

Trend ↓5.2%



HCC PMPM

\$131.33

Trend ↑18.6%



Non- HCC PMPM

\$311.37

Trend ↓12.6%



Network Utilization

99.2%



Network discounts

53.8%

Discounts



Population health trends

↓1.6%

Membership Trend



Health condition trends

↓7.1%

Neoplasms - Malignant
PMPM Trend



Covid Stay at Home Order Period Trend

March-May Incurred

Setting Analysis	Current	1-Year Prior	2-Year Prior	% Change	BMRK	Diff
PMPM by Setting						
Inpatient	\$62.02	\$79.69	\$80.00	-22.2%	\$84.16	-26.3%
Outpatient	\$77.15	\$170.33	\$175.96	-54.7%	\$70.59	9.3%
Professional	\$156.61	\$254.81	\$225.42	-38.5%	\$79.04	98.1%
Emergency Department	\$19.98	\$40.21	\$29.60	-50.3%	\$18.16	10.0%
Utilization per 1000						
Inpatient	11.3	18.0	15.0	-22.2%	10.1	11.8%
Outpatient	232.3	580.6	623.4	-60.0%	181.7	27.9%
Professional	2261.2	3424.1	3162.5	-34.0%	1540.2	46.8%
Emergency Department	30.3	53.2	43.7	-43.1%	32.2	-6.0%



Covid 19 Results as of December 7, 2020



Unique Claimants **780**



Labs Processed **773**

*Unique Member Tests



Covid-19 Positive **83**



Inpatient Admissions **3**

* UM source and claims source used



Average Length Of Stay **2.5**

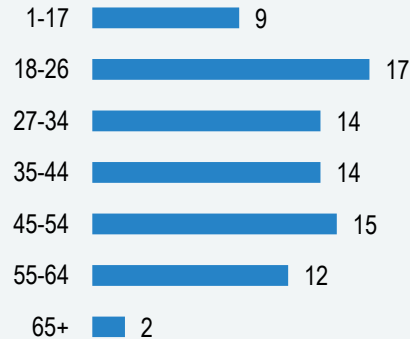


Covid-19 Total Cost **\$202,000**

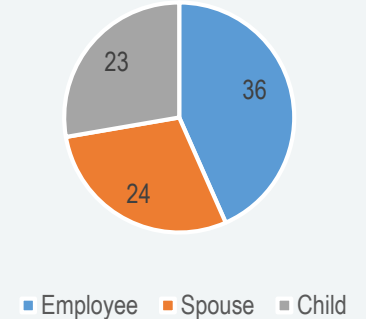


Covid-19 PMPM **\$7.90**

Age Band for Covid Positive Membership



Covid Member- Relationship



Place of Service	Percent of Utilization	Cost
Inpatient	0.2%	\$40.6K
Outpatient	38.0%	\$92.5K
Professional	57.7%	\$56.0K
Emergency Dept.	4.2%	\$12.9K

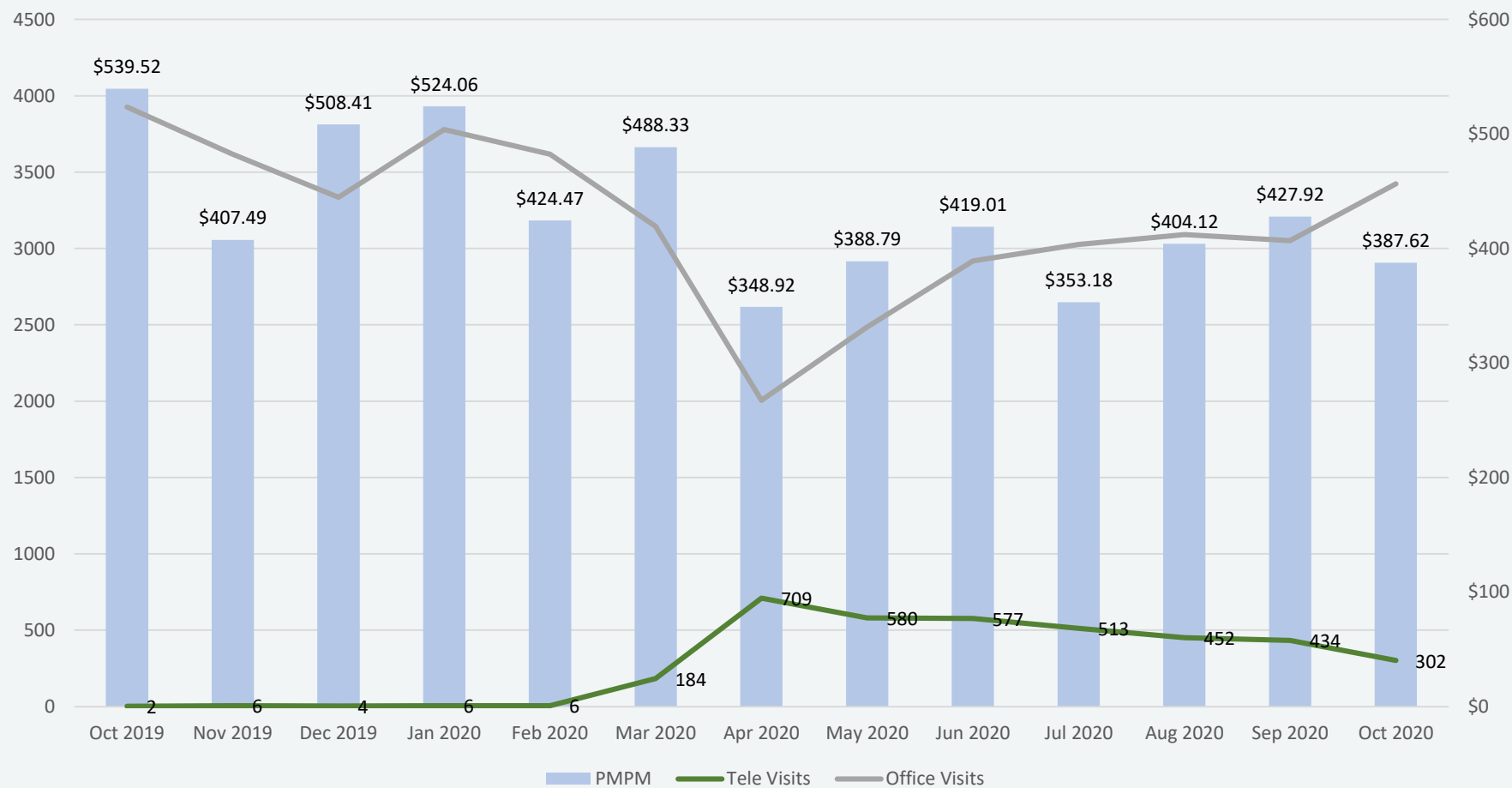
* Data is updated daily in CII-Discover

Member Access To Care During Covid-19



- Paid Medical claims PMPM decreased April through May and TeleVisits increased sharply during that period as providers pivoted to virtual platforms to maintain access to care

Primary Care and Specialist Office Visits, TeleVisits and PMPM by Month



Urgent/Emergent Care Summary

Emergency Department – Total Spend: \$974,625

447 total ED visits

6.4% of total medical spend

155.5 visits per 1,000 members

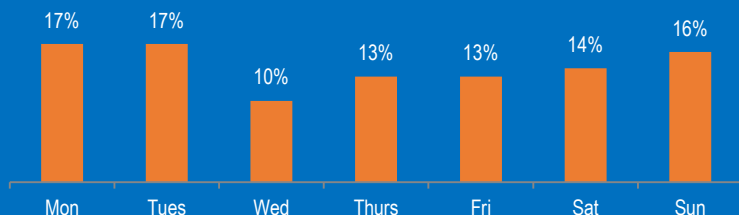
\$2,180 average cost per ED

\$28.25 ED PMPM

19.8% decrease ED PMPM trend

12.5% of ED resulted in an admission

ER Visits by Day of Week



Avoidable ED Visits

209 avoidable ED visits

72.7 avoidable ED visits per 1,000 members

53.5% of ambulatory ED visits were avoidable

\$1,629.57 average cost per avoidable ED visit

\$9.87 avoidable ED PMPM

10.3% decrease to avoidable ED PMPM

Urgent Care & Retail Health Clinic Summary

- Total paid amount was **\$265,157** (\$267,101 in prior period)
 - The average Urgent Care visit was \$178.58
 - The average Retail Health Clinic visit was \$31.39
 - There were **1545 visits in the current period** compared to 1,520 in the prior
- Employees accounted for 36% of all visits; followed by Spouse 39% and Child 25%
- <1% of Urgent Care cost occurred OON
- 72% of UC visits occurred Mon-Fri**

Telehealth and LiveHealth Online

Method	Unique Claimants	Claims	PMPM	Outpatient Paid Amount	Professional Paid Amount	Total Paid Amount
Live Health Online	6	6	\$0.20	\$0.00	\$116.00	\$116.00
Telehealth	683	1756	\$0.23	\$211.55	\$210,616.09	\$210,939.84
Total	686	1762	\$0.43	\$211.55	\$210,732.09	\$211,055.84

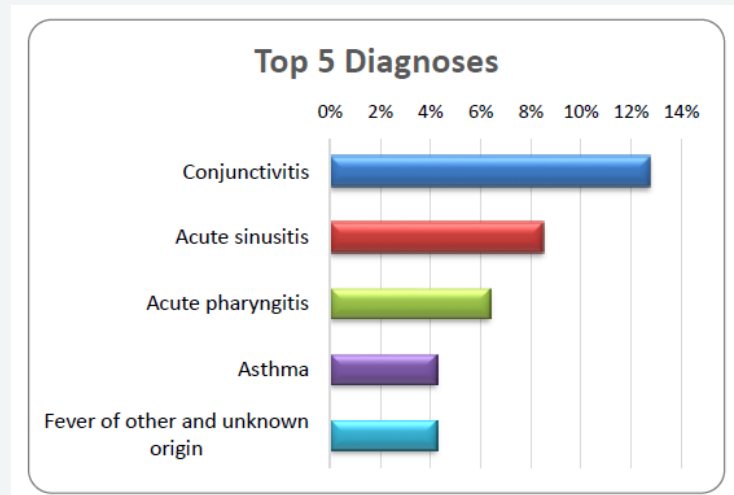
24/7 Nurseline

- 12 calls placed** to 24/7 NurseLine.
- Of the 354 calls to 24/7 NurseLine, 41.7% required a clinical evaluation.
- The most frequent nurse recommendations were to Consult Healthcare Professional, Education, or Call 911. Nurse recommendations are made based on triaging the symptom(s).
- Top Symptoms:** Dizziness/Vertigo; Head Injury; Insect Bites; and Poisoning

Registrations		VISITS		
		Medical	BH	Grand Total
Year	Count	Year	Count	Count
2020	9	2020	11	13
2019	27	2019	13	13
2018	37	2018	11	11
all prior years	46	all prior years	9	9
Total 1/1/16 thru 6/30/20	119	Total 1/1/16 thru 6/30/20	44	46

Medical

	Medical	BH
Nbr of Users	21	1
Avg Wait time (min:sec)	6:12	2:06
Avg Visit Duration (min:sec)	4:58	51:25
Avg Rating of LHO (Scale 1-5, 5=best)	4.8 (n=20)	5.0 (n=2)
Avg Rating of Provider (Scale 1-5, 5=best)	4.8 (n=20)	5.0 (n=2)



Clinical Results

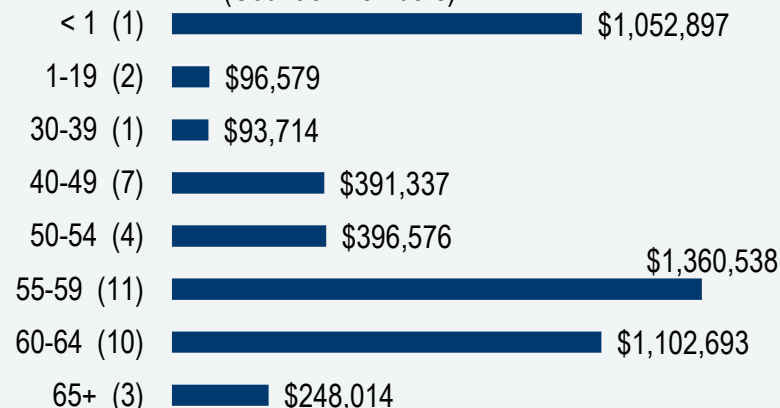


High Cost Claimants Detail

Summary

- A total of 38 members [1.3% of membership] accounted for \$5,973,105
 - In the prior period, 44 (1.5%) claimants accounted for \$5,720,111
 - The Benchmark was 0.8% of members driving 33.8% of all costs
- 81.6% of members with claims paid greater than \$75k are in an Active status in the plan
- Employees are responsible for 53% of HCC cost

HCC's ≥ \$75k by Age Bands (Count of Members)



Top Ten High Cost Claimants (\$75,000)

Case	Diagnosis	Medical	Pharmacy	Paid Amount	Relationship	Active Plan Status
1	COMPLEX MEDICAL CONDITION	\$1,052,897	\$0	\$1,052,897	Child	No
2	CANCER	\$342,602	\$3,143	\$345,744	Employee	No
3	CANCER	\$287,333	\$19,969	\$307,301	Spouse	No
4	CANCER	\$226,577	\$72,510	\$299,086	Employee	Yes
5	CROHNS DISEASE	\$10,477	\$258,649	\$269,126	Employee	Yes
6	CANCER	\$199,153	\$659	\$199,812	Employee	Yes
7	TYPE 2 DIABETES MELLITUS	\$157,309	\$34,977	\$192,287	Employee	Yes
8	CHRONIC KIDNEY DISEASE	\$175,724	\$13,277	\$189,001	Spouse	No
9	CANCER	\$169,981	\$5,227	\$175,208	Employee	No
10	SARCOIDOSIS	\$161,927	\$9,820	\$171,747	Employee	Yes

* HCC threshold determined by the member's total cost, medical plus pharmacy (if group has Rx benefit) HCC threshold is the default HCC threshold for the group.

** Benchmark: ANTHEM BOOK OF BUSINESS

Mental Health & Substance Use

Summary:

- The PMPM trend was 5.8%, a 74.1% variance from the Benchmark
- Attention- Deficit Hyperactivity Disorders is a new top 5 condition. In the prior period eating disorders was in top 5

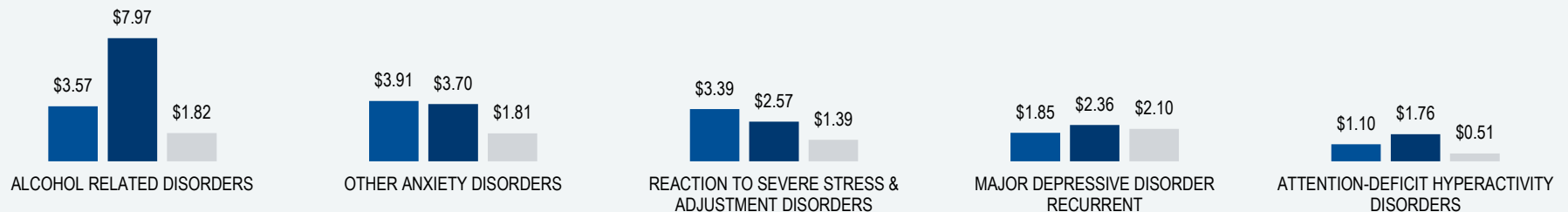
Behavioral Health PMPM



Mental Condition	Unique Claimants	Paid Amount per Unique Claimant	Inpatient	Outpatient	Professional	Total	% of Total
ALCOHOL RELATED DISORDERS	18	\$15,277	\$129,851	\$41,210	\$103,932	\$274,994	31.9%
ANXIETY DISORDERS	264	\$484	\$0	\$10,055	\$117,608	\$127,663	14.8%
REACTION TO SEVERE STRESS & ADJUSTMENT DISORDERS	131	\$676	\$0	\$0	\$88,596	\$88,596	10.3%
MAJOR DEPRESSIVE DISORDER RECURRENT	67	\$1,214	\$44,971	\$0	\$36,337	\$81,308	9.4%
ATTENTION-DEFICIT HYPERACTIVITY DISORDERS	111	\$546	\$8,320	\$1,774	\$50,523	\$60,617	7.0%

Top Five Behavioral Health Diagnoses By PMPM

■ Jul 18 - Jun 19 ■ Jul 19 - Jun 20 ■ Benchmark



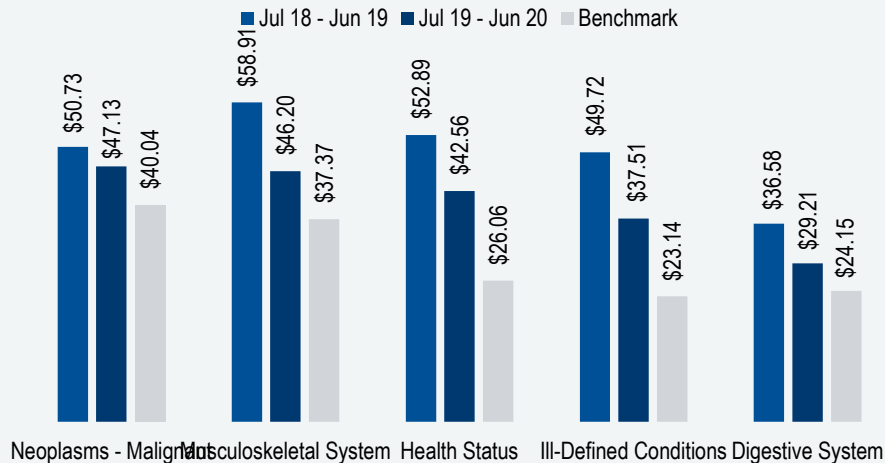
Top Health Conditions

Summary

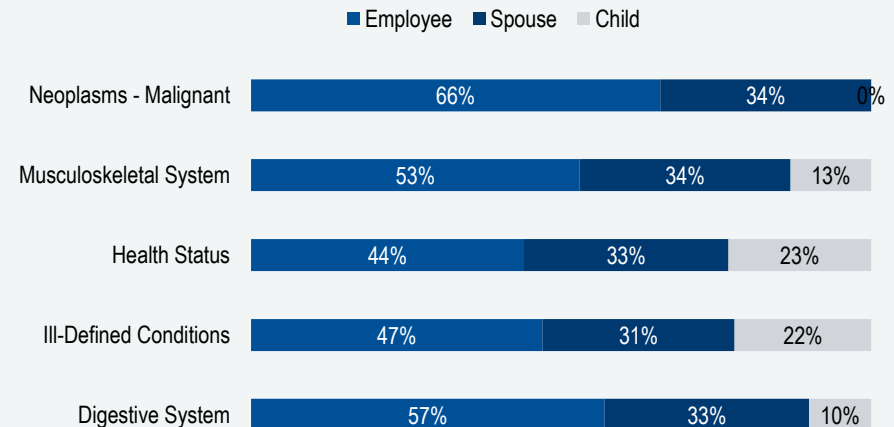
- › The top five health condition categories accounted for 45.8% of claims paid for the total plan
- › The top ten health conditions experienced a -3.2% PMPM trend
- › Neoplasms - Malignant was the top cost driver and 28.6% of HCC cost
- › Musculoskeletal System was the second highest cost driver and 8.4% of HCC cost
- › The Employee is responsible for 47.3% of spend; the Spouse is responsible for 30.1% and the Child 22.6%

Health Condition	Unique Claimants	Inpatient	Outpatient	Professional	Total	% of Total	Paid Amount per Unique Claimant
Neoplasms - Malignant	86	\$436,087	\$761,269	\$428,906	\$1,626,262	10.6%	\$18,910
Musculoskeletal System	959	\$69,268	\$539,270	\$985,407	\$1,593,945	10.4%	\$1,662
Health Status	2,150	\$0	\$412,143	\$1,056,460	\$1,468,603	9.6%	\$683
Ill-Defined Conditions	1,170	\$88,809	\$611,572	\$593,719	\$1,294,099	8.5%	\$1,106
Digestive System	330	\$223,157	\$336,606	\$448,181	\$1,007,944	6.6%	\$3,054

Top Five Health Conditions by PMPM



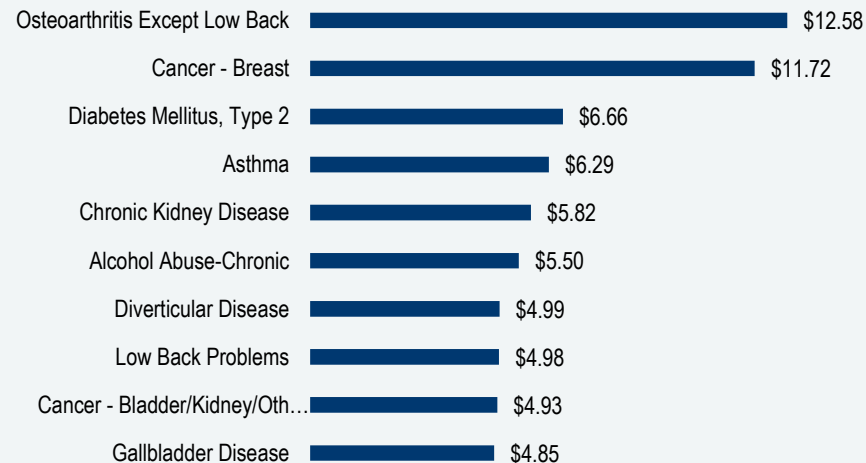
Percent of Spend by Relationship and Health Condition



Summary:

- Claims attributed to specific Lifestyle conditions make up 24.7% of the total dollars spent
- Osteoarthritis Except Low Back represents the primary Lifestyle Related Condition by paid amount and is 2.7% of the total paid claims amount in the current period.
- Stress/Anxiety/Depression represents the highest Lifestyle Related Condition per 1000 and is 92.8% above the Benchmark.

Top Ten Chronic and Complex Conditions By PMPM



Top Ten Chronic & Complex Conditions by Paid Amount	Paid Amount	Unique Members	07/19 - 06/20 Prevalence	Prevalence Trend	Benchmark Prevalence	Variance to Benchmark
Osteoarthritis Except Low Back	\$326,981	144	49.9	2.9%	27.2	83.5%
Cancer - Breast	\$304,504	13	4.5	-12.1%	4.7	-4.3%
Diabetes Mellitus, Type 2	\$173,159	117	40.5	3.2%	38.8	4.4%
Asthma	\$163,578	61	21.1	-15.2%	18.5	14.1%
Chronic Kidney Disease	\$151,349	17	5.9	32.6%	5.2	13.5%
Alcohol Abuse-Chronic	\$142,958	16	5.5	-14.6%	3.1	77.4%
Diverticular Disease	\$129,733	15	5.2	8.7%	3.9	33.3%
Low Back Problems	\$129,324	204	70.7	-21.3%	49.3	43.4%
Cancer - Bladder/Kidney/Oth Urinary	\$128,066	7	2.4	18.3%	1.1	118.2%
Gallbladder Disease	\$125,927	13	4.5	-5.8%	3.5	28.6%

ConditionCare Program Highlights

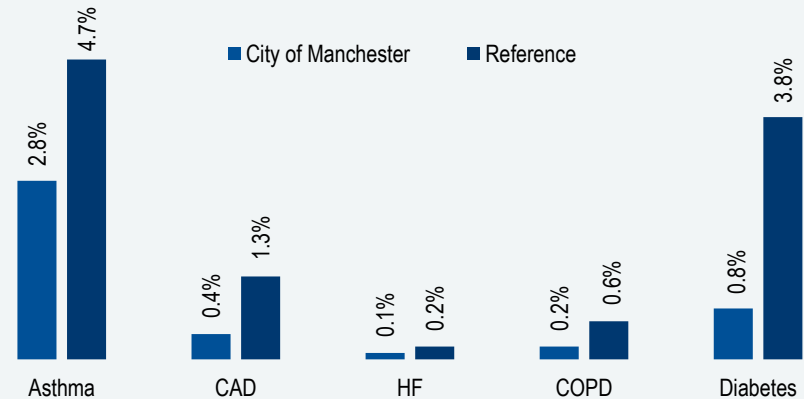
7/1/2019 – 6/30/2020

Summary:

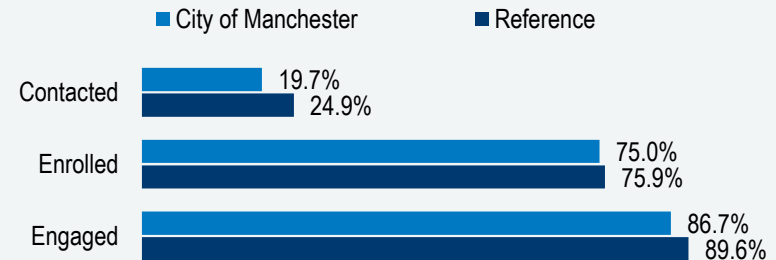
- 524 members identified with at least one of the five core conditions
- 307 Stratified (58.6%) as high or moderate risk and targeted for telephonic management
- Prevalence was below program norms
High prevalence did not occur across any of the 5 managed conditions when compared to the reference population
- Contacts
60 Contacted
45 Enrolled
39 Engaged
4 Graduated

Risk Level	Number	Percent	Reference
High	62	11.8%	6.8%
Moderate	245	46.8%	26.1%
Low	217	41.4%	67.1%
Total	524	100.0%	100.0%

Prevalence Rates Compared to Reference Population



Engagement Status



June 2019 – May 2020

Future Moms:

- There were 6 cases registered during the period
 - Of these, 100% were registered in the first trimester
- Of the registered members, 1 completed an assessment
 - The member assessed was managed as high risk
 - Outcome was a full term normal birth weight delivery

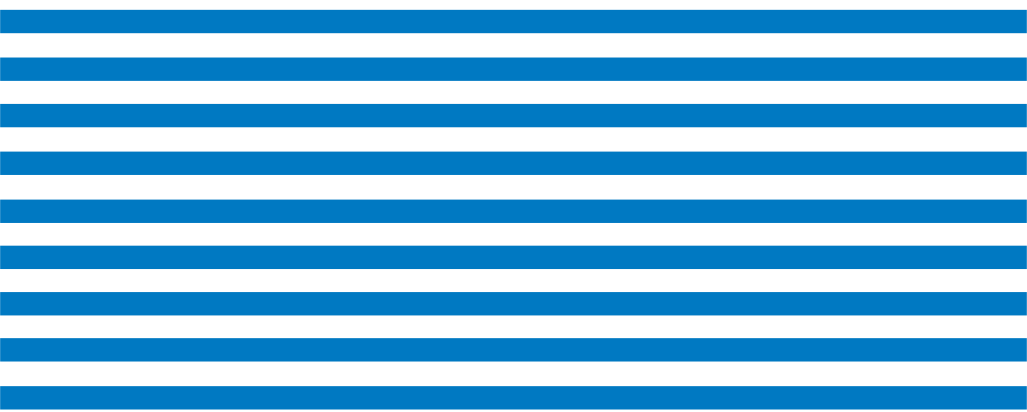
Solera – Diabetes Prevention Program

Milestones Reached: Q2 2020

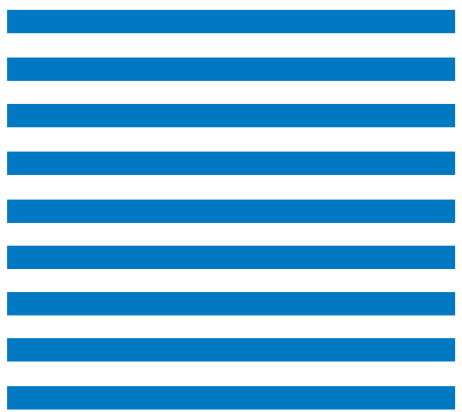
Solera Network Diabetes Prevention Program							Report Date: 10.14.2020					
2020 Q3 Utilization Report							Report Range: 7.1.2019 - 9.30.2020					
Commitments and Enrollments by Source			Top Digital Partners		Top Onsite Partners		Average Weight Loss by Week					
	Commit.	Enrolled	Partner	Enroll.	Partner	Enroll.		Wk. 9	Wk. 16	Wk. 26	Wk. 52	
Solera4me.com	0	0	HealthSlate	1	Weight Wa	1	Digital	1.5%	1.9%	2.4%	2.3%	
All Other	6	4	U.S. Prevent	1	-	-	Onsite	4.8%	4.7%	1.7%	0.3%	
Totals	6	4	Yes Health	1	-	-	Total	2.2%	2.5%	2.3%	1.8%	
Milestones by Quarter												
Timeframe	Commitment	Enrollment (by Provider Type)			M2		M3		M4		Disenrolled	
	Count	Total	Digital	Onsite	Count	%	Count	%	Count	%	Count	%
Q3 - 2019	3	3	3	0	2	67%	2	67%	0	0%	3	100%
Q4 - 2019	1	0	0	0	0	0%	0	0%	0	0%	0	0%
Q1 - 2020	1	0	0	0	0	0%	0	0%	0	0%	0	0%
Q2 - 2020	0	0	0	0	0	0%	0	0%	0	0%	0	0%
Q3 - 2020	1	1	0	1	1	100%	0	0%	0	0%	0	0%
Totals	6	4	3	1	3	75%	2	50%	0	0%	3	75%

Milestone Achievement Relative to Enrollment:

- 75% reached M2
- 50% reached M3
- 0% reached M4



Your
Pharmacy
Results



Pharmacy Trends at A Glance

-9.1%

Overall Rx Trend

\$124.24 Plan Paid PMPM

-\$12.47 decrease over prior period

Discount was the most significant Trend driver, decreasing Plan Paid PMPM by -8.7%

-15.2%

Non Specialty Rx Trend

\$68.46 Plan Paid PMPM

-\$12.27 decrease over prior period

The decrease to Non Specialty was most impacted by Discount

-0.3%

Specialty Rx Trend

\$55.78 Plan Paid PMPM

-\$0.20 decrease over prior period

The decrease to Specialty was most impacted by Drug Mix

86.6%

Generic Fill Rate (GFR)

1.4 increase over prior period

14.8% Specialty GFR

9.4%

Member Cost Share

0.1 increase over prior period

1.8% Specialty Member Cost Share

\$153.11

Average Plan Cost Per Rx

-7.3% decrease over prior period

\$5,167 Specialty Plan Cost Per Rx

Inflammatory Conditions

#1 Indication by Highest Plan Cost

\$37.41 Plan Paid PMPM

7.1% increase over prior period

38 patients in current period

Stelara

#1 Drug by Highest Plan Cost

\$17,913 Plan Paid Per Rx

-17.7% decrease over prior period

3 patients in current period

Hypertension/Heart Disease

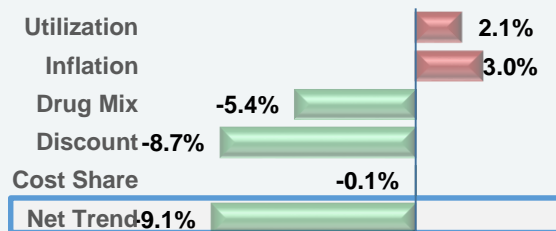
Top Indication by Total Days

415.2 Days of Therapy per Patient

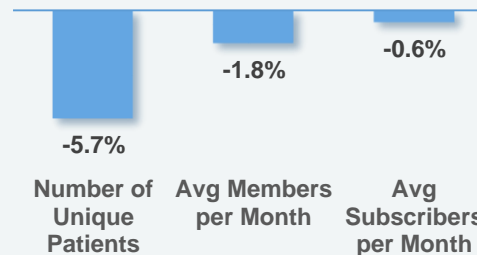
8.4% increase over prior period

506 patients in current period

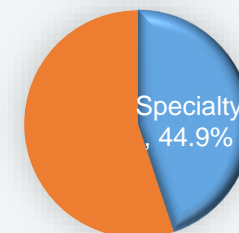
Rx Trend Components
Impact to Plan Paid PMPM



Population Change%



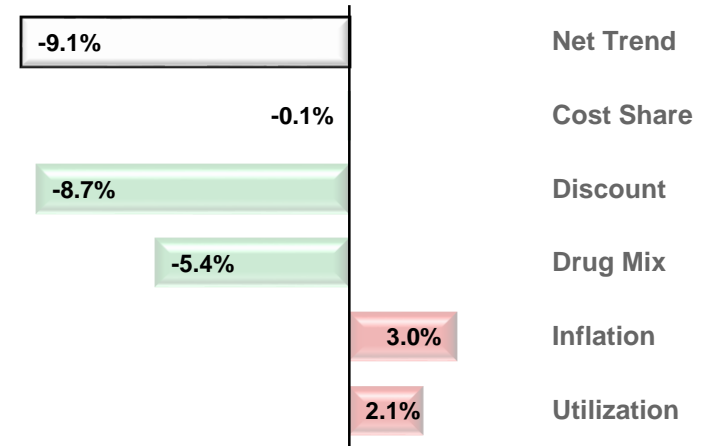
Specialty Percent of Plan Cost



Trend Components

- Net Plan Paid PMPM decreased by -\$12.47 PMPM, a -9.1% decrease from the prior year
- Discount was the most significant Trend driver, decreasing Plan Paid PMPM by -8.7%
- Member cost share increased, resulting in a decrease of -\$0.08 Plan PMPM,
- Overall, Non Specialty had the most impact on the Plan PMPM decrease, contributing a total of -\$12.27 PMPM

Rx Trend Components
Impact to Plan Paid PMPM



Description	Total	Non Specialty	Specialty
Prior Plan Cost PMPM	\$136.71	\$80.73	\$55.97
Utilization	\$2.83	\$1.68	\$0.43
Inflation	\$4.10	\$1.59	\$3.20
Drug Mix	-\$7.39	-\$4.51	-\$1.88
Discount	-\$11.92	-\$10.41	-\$1.88
Cost Share	-\$0.08	-\$0.63	-\$0.07
Net Change in Plan Cost	-9.1%	-15.2%	-0.3%
Current Plan Cost PMPM	\$124.24	\$68.46	\$55.78

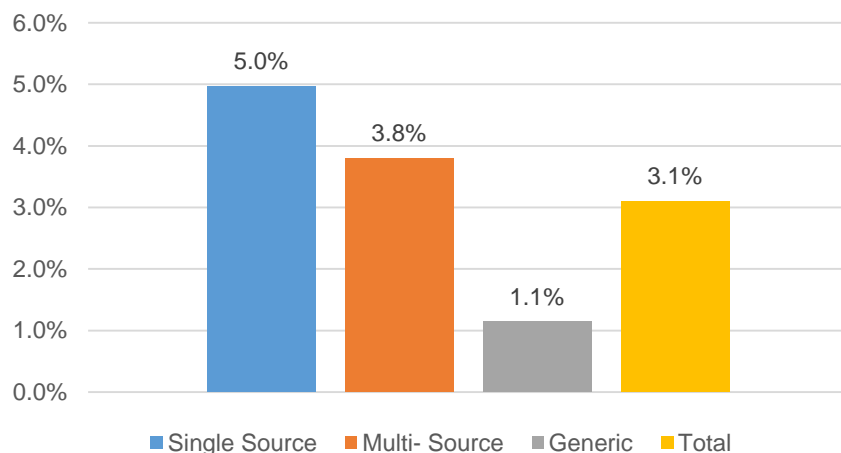
Trend Components: Inflation

Drug Inflation – Top 10 Impacted Drugs (excludes Compounds)

Drug Name	Specialty	Current AWP	Current QTY	Prior AWP	Prior QTY	% Change	Inflation Impact on AWP
PANTOPRAZOLE TAB 40MG	N	\$72,038	6,118	\$46,445	8,818	123.6%	\$39,814
STELARA INJ 90MG/ML	Y	\$324,630	12	\$280,235	11	6.2%	\$18,919
TECFIDERA CAP 240MG	Y	\$287,814	1,800	\$318,368	2,100	5.5%	\$14,927
HUMIRA PEN INJ 40MG/0.8	Y	\$161,196	50	\$385,046	128	7.2%	\$10,787
COSENTYX PEN INJ 300DOSE	Y	\$122,429	38	\$195,568	66	8.7%	\$9,830
HUMIRA PEN INJ 40/0.4ML	Y	\$226,041	70	\$43,462	14	4.0%	\$8,730
JARDIANCE TAB 25MG	N	\$102,102	5,010	\$66,440	3,450	5.9%	\$5,652
IMBRUVICA TAB 420MG	Y	\$46,678	84	\$110,823	224	12.3%	\$5,119
TRULICITY INJ 1.5/0.5	N	\$103,152	220	\$50,892	114	5.0%	\$4,939
VICTOZA INJ 18MG/3ML	N	\$82,739	657	\$81,108	681	5.6%	\$4,480

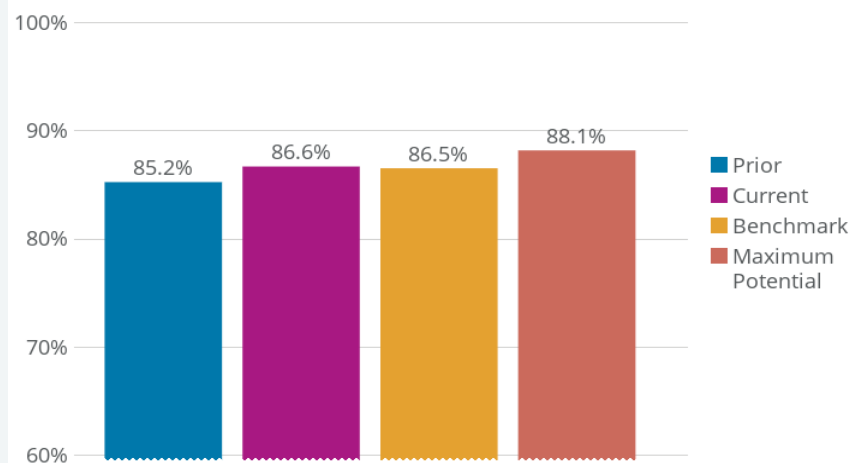
- Drug Inflation accounted for an increase of \$4.10 in PMPM

Drug Inflation



Current Period: JUL 2019 - JUN 2020

Generic Fill Rate Opportunity



Prior Period: JUL 2018 - JUN 2019

Top Line Performance Metrics

- Total Pharmacy Plan Cost PMPM (trend) decreased -9.1%, from \$136.71 to \$124.24
- Specialty Plan Cost PMPM decreased -0.3%, from \$55.97 to \$55.78
- Generic Fill Rate increased from 85.2% to 86.6%

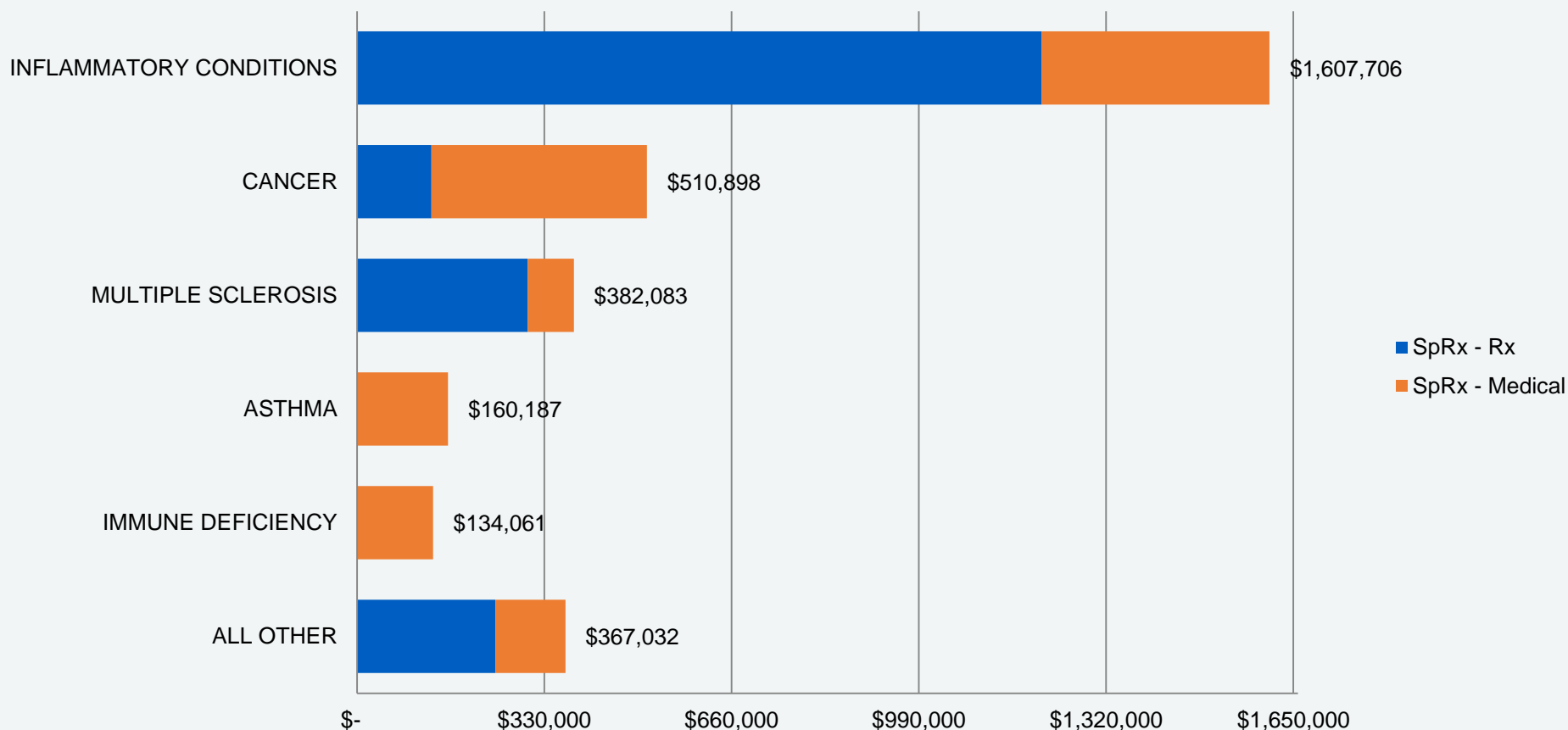
Description	Current	Prior	Change%	Benchmark	Benchmark Change%
Avg Subscribers per Month	1,189	1,197	-0.6%		
Avg Members per Month	2,872	2,923	-1.8%		
Number of Unique Patients	2,283	2,422	-5.7%		
Pct Members Utilizing Benefit	79.5%	82.9%	-3.4%		
Total Plan Cost	\$4,281,350	\$4,795,280	-10.7%		
Total Days	1,206,799	1,203,494	0.3%		
Total Rxs	27,963	29,023	-3.7%		
Average Member Age	35.6	35.6	-0.1%	35.5	0.3%
Plan Cost PMPM	\$124.24	\$136.71	-9.1%	\$99.06	-3.2%
Plan Cost/Day	\$3.55	\$3.98	-11.0%	\$3.56	-4.4%
Plan Cost per Rx	\$153.11	\$165.22	-7.3%	\$131.99	1.5%
Nbr Rxs PMPM	0.81	0.83	-1.9%	0.75	-4.6%
Generic Fill Rate	86.6%	85.2%	1.4%	86.5%	0.9%
Home Delivery Utilization	14.0%	17.4%	-3.4%	11.1%	-4.9%
Home Delivery w participating R90	14.0%	17.4%	-3.4%	13.6%	-3.0%
Member Cost %	9.4%	9.3%	0.1%	11.0%	-0.3 %
Specialty Percent of Plan Cost	44.9%	40.9%	4.0%	48.2%	4.2%
Specialty Plan Cost PMPM	\$55.78	\$55.97	-0.3%	\$47.65	5.9%
Formulary Compliance Rate	99.3%	97.5%	1.8%	97.1%	-0.2%

Specialty Key Statistics Detail

	Non Specialty			Specialty			Benchmark Specialty	Benchmark Change%
Description	Current	Prior	Change%	Current	Prior	Change%		
Avg Subscribers per Month	1,189	1,197	-0.6%	1,189	1,197	-0.6%		
Avg Members per Month	2,872	2,923	-1.8%	2,872	2,923	-1.8%		
Number of Unique Patients	2,283	2,421	-5.7%	53	52	1.9%		
Pct Members Utilizing Benefit	79.5%	82.8%	-3.3%	1.8%	1.8%	0.1%		
Total Plan Cost	\$2,359,258	\$2,831,931	-16.7%	\$1,922,092	\$1,963,348	-2.1%		
Percent of Total Plan Cost	55.1%	59.1%	-4.0%	44.9%	40.9%	4.0%		
Total Days	1,193,350	1,189,908	0.3%	13,449	13,586	-1.0%		
Total Rxs	27,591	28,624	-3.6%	372	399	-6.8%		
Percent of Total Rxs	98.67%	98.63%	0.04%	1.33%	1.37%	-0.04%		
Plan Cost PMPM	\$68.46	\$80.73	-15.2%	\$55.78	\$55.97	-0.3%	\$47.65	5.9%
Plan Cost/Day	\$1.98	\$2.38	-16.9%	\$142.92	\$144.51	-1.1%	\$143.44	45.4%
Plan Cost per Rx	\$85.51	\$98.94	-13.6%	\$5,166.91	\$4,920.67	5.0%	\$4,897.58	51.6%
Nbr Rxs PMPM	0.80	0.82	-1.9%	0.011	0.011	-5.1%	0.010	-30.1%
Generic Fill Rate	87.6%	86.1%	1.5%	14.8%	17.0%	-2.3%	19.3%	-26.9%
Member Cost %	14.7%	13.9%	0.8%	1.8%	1.7%	0.1%	11.0%	0.1 %

- Specialty drug costs totaled \$3,268,479 (41% under medical)
- 37.1% of medical specialty drug spend (\$497,531) occurred in the more costly outpatient hospital settings.
- When combining medical and pharmacy specialty drug spend, 6 members had more than \$100,000 in costs which contributed 25.5% of the specialty drug spend

Top Specialty Therapeutic Classes



Top 10 Indications

- INFLAMMATORY CONDITIONS is the highest cost Indication at \$37.41 Plan Paid PMPM, or \$1.3M
- In comparing all Top 10 Indications, ASTHMA experienced the most change over the prior period, decreasing Plan Paid PMPM by -32.6%
- PSYCHIATRIC/NEURO DISORDERS has a 73.0% GFR that is -12.7 basis points lower than the benchmark
- Total Plan Spend for the Top 10 Indications below is \$3.1M, resulting in 73.0% of Total Plan Cost

Top Indications by Plan Cost

Rank	Bmrk Rank	Indication	Rxs	Patients	Plan Cost	Plan Cost PMPM	GFR	Bmrk GFR	Prior Rank	Prior Rxs	Prior Patients	Prior Plan Cost PMPM	Prior GFR	% Change Plan PMPM
1	1	INFLAMMATORY CONDITIONS	269	38	\$1,289,072	\$37.41	24.5%	28.1%	1	292	38	\$34.93	29.8%	7.1%
2	2	DIABETES	1,442	158	\$638,905	\$18.54	36.5%	45.6%	2	1,349	153	\$15.54	42.6%	19.3%
3	5	MULTIPLE SCLEROSIS	40	4	\$300,833	\$8.73	0.0%	12.6%	3	47	4	\$9.99	0.0%	-12.6%
4	7	ATTENTION DEFICIT DISORDERS	1,383	164	\$196,530	\$5.70	80.0%	77.8%	4	1,348	165	\$6.82	74.9%	-16.4%
5	6	ASTHMA	1,231	359	\$144,408	\$4.19	63.8%	69.8%	5	1,268	397	\$6.22	33.0%	-32.6%
6	11	DEPRESSION	3,007	546	\$138,023	\$4.01	98.7%	97.5%	7	3,156	551	\$4.91	99.1%	-18.5%
7	3	CANCER	122	27	\$132,416	\$3.84	90.2%	85.9%	6	113	26	\$5.32	87.6%	-27.8%
8	13	PSYCHIATRIC/NEURO DISORDERS	211	35	\$103,280	\$3.00	73.0%	85.7%	8	221	47	\$3.44	70.6%	-12.8%
9	19	GROWTH DEFICIENCY	8	1	\$90,313	\$2.62	0.0%	0.0%	12	9	1	\$2.58	0.0%	1.4%
10	10	ANTICOAGULATION	182	40	\$90,082	\$2.61	29.7%	29.7%	11	217	41	\$2.80	36.4%	-6.6%
TOTAL			7,895	1,372	\$3,123,861	\$90.65				8,020	1,423	\$92.56		-2.1%

Top 25 Drugs

- The Top 25 Drugs by highest Plan Cost are 52.7% of Total Plan Spend
- 16 of the Top 25 Drugs are Specialty, resulting in \$1.6M of Total Plan Spend
- In comparing the Top 25 Drugs, Aubagio experienced the most change over the prior period, increasing Plan Paid PMPM by 944%

Rank	Bmrk Rank	Brand Name	SPCLTY	Indication	Rxs	Patients	Plan Cost	Plan Cost PMPM	Prior Rank	Prior Rxs	Prior Patients	Prior Plan Cost PMPM	% Change Plan PMPM
1	2	STELARA	Y	INFLAMMATORY CONDITIONS	18	3	\$322,426	\$9.36	3	11	1	\$6.82	37.1%
2	7	TECFIDERA	Y	MULTIPLE SCLEROSIS	30	3	\$230,000	\$6.67	2	35	3	\$7.62	-12.4%
3	1	HUMIRA(CF) PEN	Y	INFLAMMATORY CONDITIONS	32	4	\$178,530	\$5.18	36	7	2	\$1.04	400.3%
4	3	HUMIRA PEN	Y	INFLAMMATORY CONDITIONS	25	3	\$128,414	\$3.73	1	64	8	\$9.09	-59.0%
5	5	TRULICITY	N	DIABETES	106	18	\$110,747	\$3.21	14	53	10	\$1.79	79.4%
6	18	COSENTYX PEN (2 PENS)	Y	INFLAMMATORY CONDITIONS	19	3	\$100,900	\$2.93	4	30	4	\$4.64	-36.8%
7	36	NUTROPIN AQ NUSPIN	Y	GROWTH DEFICIENCY	8	1	\$90,313	\$2.62	6	9	1	\$2.58	1.4%
8	21	OTEZLA	Y	INFLAMMATORY CONDITIONS	25	6	\$85,857	\$2.49	13	19	2	\$1.84	35.2%
9	4	JARDIANCE	N	DIABETES	103	22	\$82,125	\$2.38	17	75	22	\$1.59	50.2%
10	11	VYVANSE	N	ATTENTION DEFICIT DISORDERS	237	37	\$78,738	\$2.28	7	243	37	\$2.25	1.4%
11	10	HUMALOG	N	DIABETES	76	16	\$73,577	\$2.14	10	76	13	\$2.05	4.2%
12	37	AUBAGIO	Y	MULTIPLE SCLEROSIS	10	1	\$70,833	\$2.06	119	1	1	\$0.20	944.6%
13	29	HUMIRA(CF)	Y	INFLAMMATORY CONDITIONS	13	1	\$66,782	\$1.94	46	5	1	\$0.74	162.0%
14	49	MESALAMINE	N	INFLAMMATORY CONDITIONS	48	10	\$66,568	\$1.93	12	47	9	\$1.89	2.1%
15	14	LANTUS SOLOSTAR	N	DIABETES	101	23	\$64,699	\$1.88	19	83	23	\$1.50	25.2%
16	30	ENBREL	Y	INFLAMMATORY CONDITIONS	12	1	\$61,481	\$1.78	15	12	1	\$1.72	3.6%
17	236	NINLARO	Y	CANCER	6	1	\$61,007	\$1.77	NA				NA
18	20	VICTOZA 3-PAK	N	DIABETES	47	9	\$58,536	\$1.70	16	41	7	\$1.63	4.1%
19	67	REXULTI	N	PSYCHIATRIC/NEURO DISORDERS	23	6	\$50,246	\$1.46	27	29	5	\$1.26	15.5%
20	98	ORENCIA CLICKJECT	Y	INFLAMMATORY CONDITIONS	11	1	\$48,864	\$1.42	41	8	2	\$0.96	47.1%
21	8	JANUVIA	N	DIABETES	47	12	\$46,355	\$1.35	21	48	13	\$1.45	-7.4%
22	32	XELJANZ XR	Y	INFLAMMATORY CONDITIONS	11	1	\$45,868	\$1.33	30	9	1	\$1.14	16.9%
23	63	XELJANZ	Y	INFLAMMATORY CONDITIONS	10	1	\$45,167	\$1.31	20	12	1	\$1.48	-11.4%
24	15	DUPIXENT SYRINGE	Y	DERMATOLOGIC CONDITIONS	15	3	\$45,051	\$1.31	NA				NA
25	201	TALTZ AUTOINJECTOR (2	Y	INFLAMMATORY CONDITIONS	4	2	\$44,856	\$1.30	NA				NA
TOTAL					1,037	188	\$2,257,941	\$65.52		917	167	\$55.29	18.5%

Patient Care Needs

Well

healthy patients taking medications to sustain/improve health or treat occasional disruptions

-vaccinations, allergies, vitamins

Acute

treatment of intermittent/seasonal conditions

-infections, cough and cold

Chronic

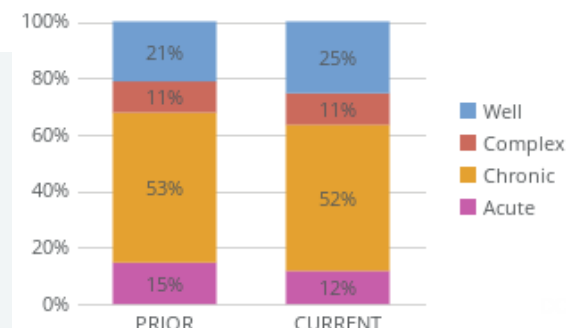
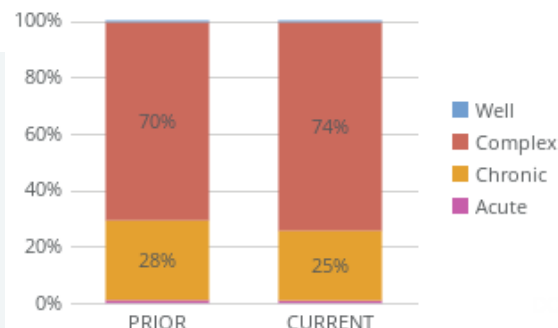
diseases with long duration

-anemia, depression/anxiety, asthma

Complex

numerous lingering conditions

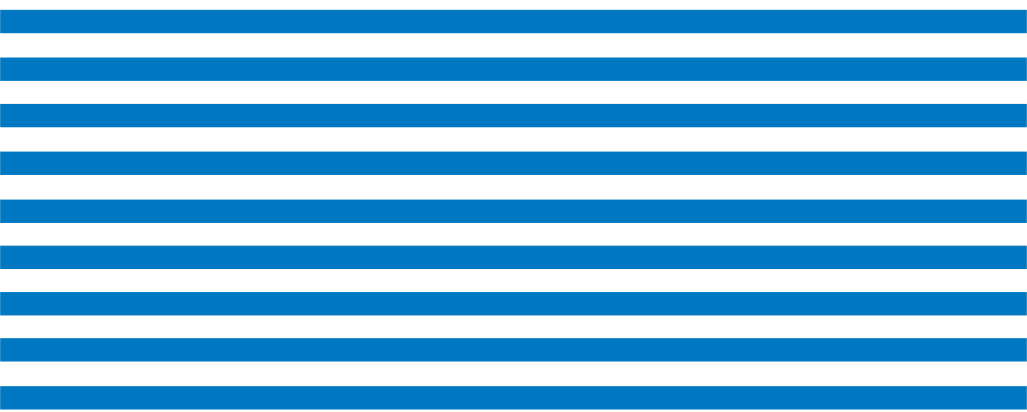
-hemophilia, cancer, HIV



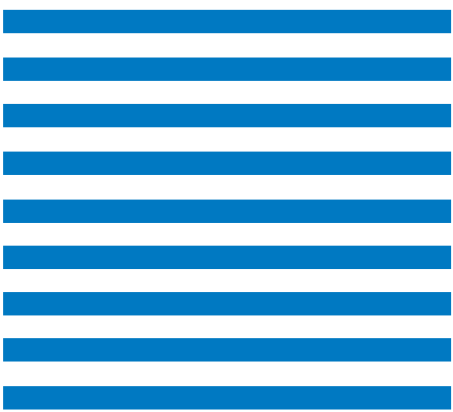
Cost %

Member %

	Well	Acute	Chronic	Complex	Total
Members	728	338	1,485	320	2,871
Members %	25.4%	11.8%	51.7%	11.1%	100.0%
Plan Cost	\$22,194	\$36,588	\$1,062,445	\$3,160,123	\$4,281,350
Plan Cost %	0.5%	0.9%	24.8%	73.8%	100.0%
Member Age (Avg)	28.6	23.8	43.2	52.0	38.2
Copay	\$2,542	\$9,892	\$226,585	\$203,038	\$442,057
Copay/Member	\$3	\$29	\$153	\$634	\$154
Plan Spend/Member	\$30	\$108	\$715	\$9,875	\$1,491
Days of Therapy/Member	24.6	62.3	451.7	1553.2	420.3
GFR %	80.6%	93.3%	89.9%	81.1%	86.6%
Home Delivery Utilization %	1.9%	6.4%	12.0%	17.6%	14.0%
HD + Participating R90 %	1.9%	6.4%	12.0%	17.6%	14.0%



Your
Wellness
Results





Gym Reimbursement

- **July 2018 – June 2019**
 - 103 members were reimbursed a total of **\$19,626**
- **July 2019 – June 2020**
 - 60 members were reimbursed a total of **\$10,724**



Community Health Education

- **July 2018 – June 2019**
 - 1 member was reimbursed a total of **\$160**
- **July 2019 – June 2020**
 - No reimbursements on file

Health areas for discussion:

- Musculoskeletal Health
- Weight Management
- Stress/Anxiety/Depression
- Cancer

Opportunities:

- \$25,000 Anthem-sponsored wellness funds
 - *Continue to work with wellness committee on strategy & spending during monthly meetings*
- Continued promotion of programs through wellness committee & other marketing channels
 - *Diabetes Prevention Program*
 - *Stress & Anxiety support*
 - *Annual Know Your Numbers campaign*
 - *Other initiatives as identified*





Utilization by Setting: Three Periods

	Unique Claimants	In Network	Out of Network	07/17 - 06/18	07/18 - 06/19	07/19 - 06/20	Trend	Benchmark	Variance to Benchmark
Inpatient Facility	121								
Acute Admissions		141	*	178	172	142			
Acute Admissions per 1,000		49.0	0.3	59.0	58.9	49.4	-16.1%	52.6	-6.1%
Acute Days		672	34	943	668	706			
Acute Days per 1,000		233.7	11.8	312.8	228.6	245.5	7.4%	245.4	0.0%
Average Length of Stay - Acute		4.8	34.0	5.3	3.9	5.0	28.0%	4.7	6.4%
Paid Amount per Acute Admit		\$21,405	\$16,721	\$13,944	\$13,068	\$21,372	63.5%	\$23,495	-9.0%
Inpatient Paid Amount		\$3,025,671	\$16,721	\$2,528,842	\$2,247,682	\$3,042,393			
Paid Amount PMPM		\$87.69	\$0.48	\$69.90	\$64.09	\$88.18	37.6%	\$103.84	-15.1%
Outpatient Facility	1,582								
ED Visits		447	0	553	523	447			
ED Visits per 1,000		155.5	0.0	183.4	179.0	155.5	6,010.1	178.5	-12.9%
ED Paid Amount per Visit		\$2,180	\$0	\$2,103	\$2,363	\$2,180	-7.7%	\$1,647	32.4%
Total Outpatient Visits per 1000		1,846.1	01.4	2,545.4	2,446.5	1,847.5	-24.5%	1,223.3	51.0%
Total Paid Amount per Visit		\$960	-\$681	\$886	\$891	\$958	7.5%	\$1,200	-20.2%
Total Outpatient Paid Amount		\$5,093,676	-\$2,725	\$6,800,639	\$6,372,692	\$5,090,952			
Total Outpatient PMPM		\$147.63	-\$0.08	\$188.00	\$181.71	\$147.55	-18.8%	\$122.31	20.6%
Professional	2,787								
Primary Care									
Primary Care Visits		7,742	102	8,980	9,002	7,844			
Visits per 1,000		2,692.6	35.5	2,978.9	3,080.2	2,728.1	-11.4%	2,119.2	28.7%
Paid Amount per Visit		\$195	\$292	\$165	\$175	\$196	12.3%	\$126	55.6%
Specialty Care									
Specialty Care Visits		25,515	289	27,824	28,280	25,804			
Visits per 1,000		8,874.0	100.5	9,230.1	9,676.4	8,974.5	-7.3%	6,010.1	49.3%
Paid Amount per Visit		\$217	\$277	\$213	\$219	\$217	-0.6%	\$170	27.6%
Total Professional Paid Amount		\$7,031,211	\$109,791	\$7,406,471	\$7,751,949	\$7,141,002			
Total Professional PMPM		\$203.79	\$3.18	\$204.75	\$221.04	\$206.97	-6.4%	\$107.42	92.7%
Total									
PAID Amount		\$15,150,558	\$123,787	\$16,735,952	\$16,372,323	\$15,274,346			
Total Medical PMPM		\$439.11	\$3.59	\$462.65	\$466.83	\$442.70	-5.2%	\$333.57	32.7%

** Benchmark: ANTHEM BOOK OF BUSINESS (N/A)

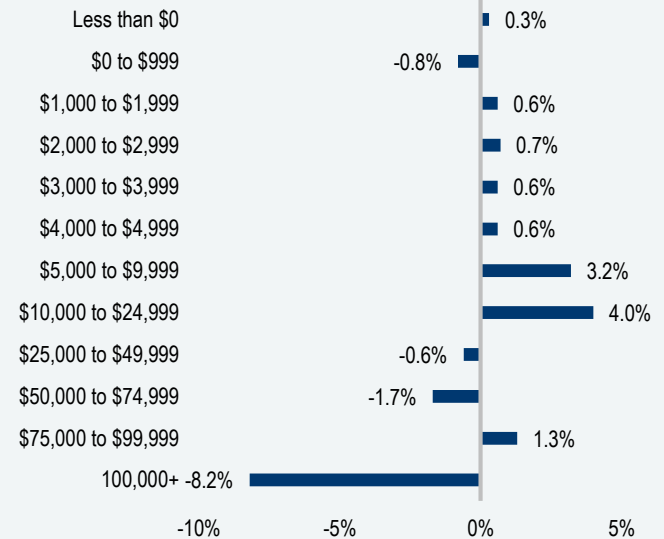
Paid Claims Distribution

- There are 295 total unique members who have not filed a claim during the time period represented on this report
- 45.4% of members had less than \$1,000 in medical plan paid benefit coverage in the current period
- 34.5% of members had between \$1,000 and \$4,999 in medical plan paid benefit coverage in the current period
- 16.2% of members had between \$5,000 and \$24,999 in medical plan paid benefit coverage in the current period
- 3.3% of members had between \$25,000 and \$99,999 in medical plan paid benefit coverage in the current period
- 0.5% of members had \$100K+ in medical plan paid benefit coverage in the current period

Medical Paid Amount

Paid Amount Range	Unique Claimants	Percent Total Claimants	Total Paid Amount	Average Per Claimant	Percent Paid Amount	Percent Paid Amt Benchmark
\$0 to \$999	1,241	44.3%	\$499,338	\$402	3.3%	4.1%
\$1,000 to \$1,999	467	16.7%	\$677,422	\$1,451	4.4%	3.8%
\$2,000 to \$2,999	243	8.7%	\$593,327	\$2,442	3.9%	3.2%
\$3,000 to \$3,999	152	5.4%	\$521,974	\$3,434	3.4%	2.8%
\$4,000 to \$4,999	104	3.7%	\$460,038	\$4,423	3.0%	2.4%
\$5,000 to \$9,999	257	9.2%	\$1,870,512	\$7,278	12.2%	9.0%
\$10,000 to \$24,999	197	7.0%	\$3,103,515	\$15,754	20.3%	16.3%
\$25,000 to \$49,999	63	2.3%	\$2,104,471	\$33,404	13.8%	14.4%
\$50,000 to \$74,999	16	0.6%	\$977,049	\$61,066	6.4%	8.1%
\$75,000 to \$99,999	12	0.4%	\$1,043,516	\$86,960	6.8%	5.5%
\$100,000+	15	0.5%	\$3,487,777	\$232,518	22.8%	31.0%
Total - All Claimants	2,799	100.0%	\$15,274,346	\$5,457	100.0%	100.0%

PERCENTAGE POINTS FROM BENCHMARK



Percent of Spend by Paid Amount Range

■ \$0-\$999 ■ \$1,000-\$4,999 ■ \$5,000-\$24,999 ■ \$25,000-\$99,999 ■ \$100,000+



Medical Costs

- Total paid medical claims = \$15,274,346 (6.7% decrease from the prior period)
- The medical PMPM of \$442.70 represents a ↓5.2% trend from the prior period
 - Non-HCC medical PMPM (excluding HCCs) trend: ↓12.6%

Inpatient Facility Acute

- › PMPM: \$88.18 ↑37.2%
 - › Benchmark: \$103.84
- › Cost/acute admit: \$21,372 ↑63.5%
 - › Benchmark: \$23,495

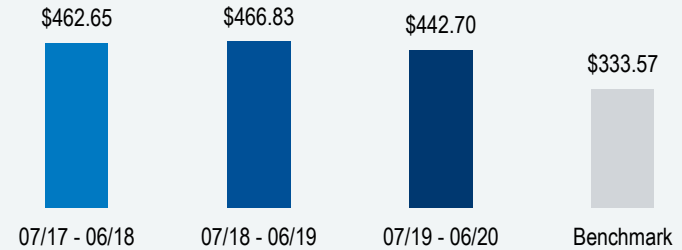
Outpatient Facility

- › PMPM: \$147.55 ↓18.8%
 - › Benchmark: \$122.31
- › Cost/visit: \$958 ↑7.5%
 - › Benchmark: \$1,200

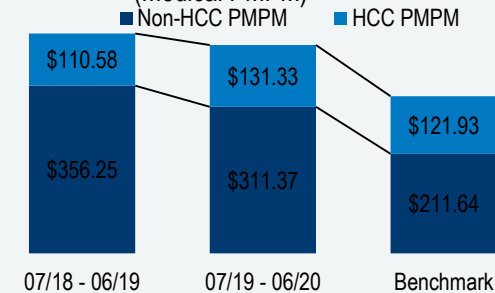
Professional

- › PMPM: \$206.97 ↓6.4%
 - › Benchmark: \$107.42
- › Cost/visit: \$212.23 ↑2.1%
 - › Benchmark: \$158.57

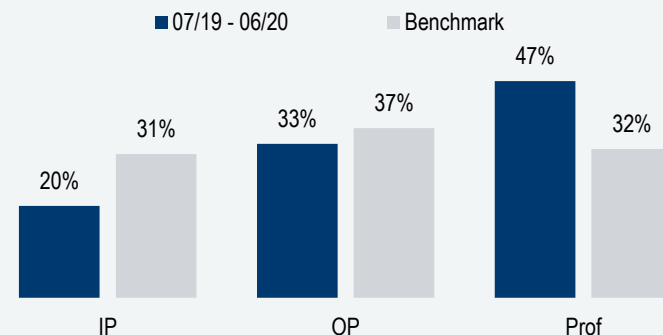
Medical PMPM



High Cost Claimants ≥ \$75k
(Medical PMPM)



Percent Of Spend By Setting

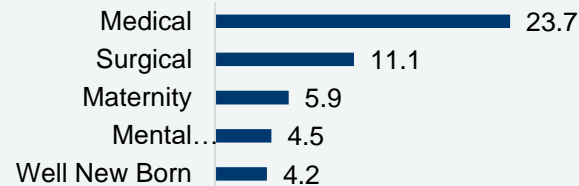


Utilization Trends

Inpatient Facility

- › Acute Admits/1,000: 49.4 ↓16.1%
 - › Benchmark: 52.6
- › ALOS: 5.0 ↑28.0%
 - › Benchmark: 4.7
- › Days per 1,000: 245.5 ↑7.4%
 - › Benchmark: 245.4

Top Inpatient Admits per 1,000



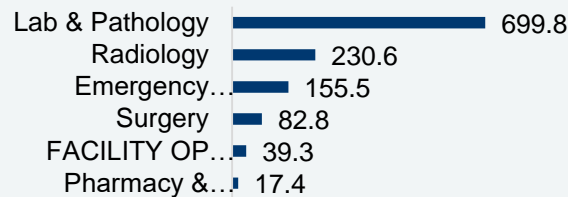
- **Top 3 Medical Admissions by Total Paid Amount:** Infant Care; Heart Disease; Intracranial Injury

- **Top 3 Surgical Admissions by Paid Amount:** Respiratory Ventilation; Brain; Stem Cell Transplant

Outpatient Facility

- › Visits/1,000: 1,847.5 ↓24.5%
 - › Benchmark: 1,223.3
- › Emergency Dept. (ED) visits per 1,000: 155.5 ↓13.1%
 - › Benchmark: 178.5

Top Outpatient Visits per 1,000



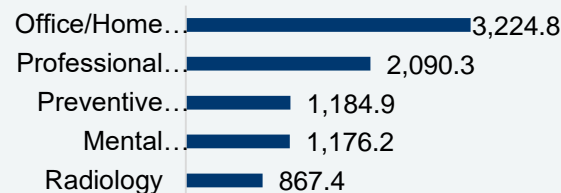
- **Top 3 Outpatient Surgical Procedures by Paid Amount:**

1. Insertion of Defibrillation Device
2. Knee Arthroplasty
3. Hip Arthroplasty

Professional

- › Visits/1,000: 11,702.6 ↓8.3%
 - › Benchmark: 8,129.3
- › PCP visits per 1,000: 2,728.1 ↓11.4%
 - › Benchmark: 2,119.2
- › Specialty visits per 1,000: 8,974.5 / ↓7.3%
 - › Benchmark: 6,010.1

Top Professional Visits per 1,000



Summary:

- PCP and Specialty Professional Cost was 46.8% of total medical spend
- Preventative services visits per 1000 ↓ 11% from prior period
- **Mental health and substance use visits per 1000 ↑ 1.2%**
- Office/Home visits per 1000 ↓ 9.6% from prior period

J-Code Drugs Paid Under Medical

\$1.3M
in plan expense

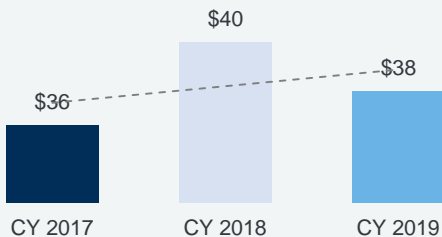
8.5%
of medical spend

586
unique members

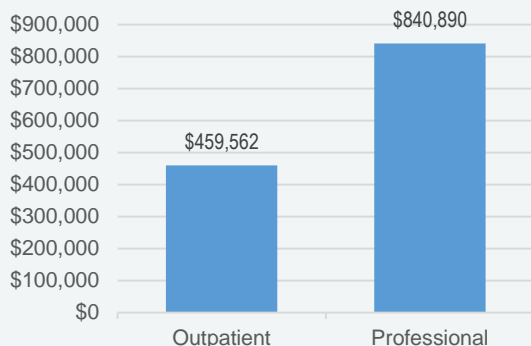
\$37.74
PMPM

↓ 6.4%
PMPM Trend

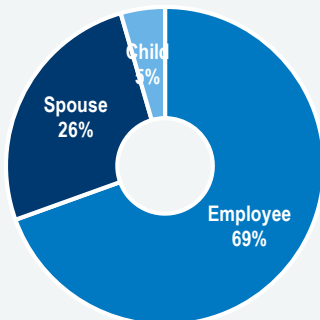
PMPM



Paid Amount by Setting



Paid Amount By Relationship



Top 5 J-Codes by Paid Amount

Health Service Code	Health Service Code Description	Claims Amount
J1745	INJ INFLIXIMAB EXCL BIOSIMILR 10 MG	\$261,922.39
J2357	INJECTION OMALIZUMAB 5 MG	\$138,453.95
J3380	INJECTION VEDOLIZUMAB 1 MG	\$134,958.45
J9299	INJECTION NIVOLUMAB 1 MG	\$101,640.80
J9355	INJ TRASTUZUMAB EXCLD BIOSIM 10 MG	\$89,830.50

Top 5 J-Codes by Unit Count

Health Service Code	Health Service Short Code Definition Text	Claims Amount	Claims Service Units
J0585	BOTULINUM TOXIN TYPE A PER UNIT	\$45,902.56	6980
J3380	INJECTION VEDOLIZUMAB 1 MG	\$134,958.45	5130
J2357	INJECTION OMALIZUMAB 5 MG	\$138,453.95	4011
J1745	INJ INFLIXIMAB EXCL BIOSIMILR 10 MG	\$261,922.39	3650
J9299	INJECTION NIVOLUMAB 1 MG	\$101,640.80	3360

CANCER

29%
of Jcode spend

NERVOUS SYSTEM

19%
of Jcode spend

DIGESTIVE SYSTEM

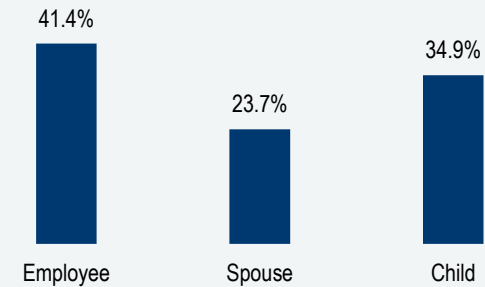
1%
of Jcode spend

Top Health Conditions by Relationship and PMPM

Summary:

- The Total Health Conditions experienced a -3.2% PMPM trend
- The Employee is responsible for 47.3% of spend; the Spouse is responsible for 30.1% and the Child 22.6%
 - Neoplasms - Malignant: Employee represents 66.0% of the spend for this category
 - Musculoskeletal System: Employee represents 53.4% of the spend for this category

Membership By Relationship



	Employee		Spouse		Child		Total	Total	PMPM	Variance to
	Paid	PMPM	Paid	PMPM	Paid	PMPM	Paid Amount	PMPM	Trend	Benchmark
Neoplasms - Malignant	\$1,072,901	\$75.05	\$553,054	\$67.72	\$307	\$0.03	\$1,626,262	\$47.13	-7.1%	17.7%
Musculoskeletal System	\$850,709	\$59.51	\$534,773	\$65.48	\$208,463	\$17.31	\$1,593,945	\$46.20	-21.6%	23.6%
Health Status	\$647,345	\$45.28	\$483,229	\$59.17	\$338,029	\$28.07	\$1,468,603	\$42.56	-19.5%	63.3%
Ill-Defined Conditions	\$613,338	\$42.91	\$401,321	\$49.14	\$279,440	\$23.21	\$1,294,099	\$37.51	-24.6%	62.1%
Digestive System	\$570,624	\$39.92	\$331,986	\$40.65	\$105,334	\$8.75	\$1,007,944	\$29.21	-20.1%	20.9%
Injury & Poisoning	\$444,124	\$31.07	\$223,188	\$27.33	\$296,046	\$24.59	\$963,358	\$27.92	8.9%	18.8%
Newborn	\$0	\$0.00	\$0	\$0.00	\$931,041	\$77.32	\$931,041	\$26.98	259.6%	191.9%
Circulatory System	\$598,212	\$41.85	\$286,570	\$35.09	\$12,599	\$1.05	\$897,381	\$26.01	30.1%	-11.0%
Behavioral Health	\$414,556	\$29.00	\$105,680	\$12.94	\$341,381	\$28.35	\$861,617	\$24.97	5.8%	74.1%
Nervous System	\$494,158	\$34.57	\$296,260	\$36.28	\$34,984	\$2.91	\$825,402	\$23.92	34.8%	83.6%
Subtotal	\$5,705,966	\$399.16	\$3,216,064	\$393.79	\$2,547,624	\$211.58	\$11,469,653	\$332.42	-3.2%	38.4%
All Other	\$1,526,278	\$106.77	\$1,377,529	\$168.67	\$900,885	\$74.82	\$3,804,692	\$110.27	-10.7%	18.0%
Total	\$7,232,244	\$505.93	\$4,593,593	\$562.46	\$3,448,509	\$286.40	\$15,274,346	\$442.70	-5.2%	32.7%

Medical Paid Claims

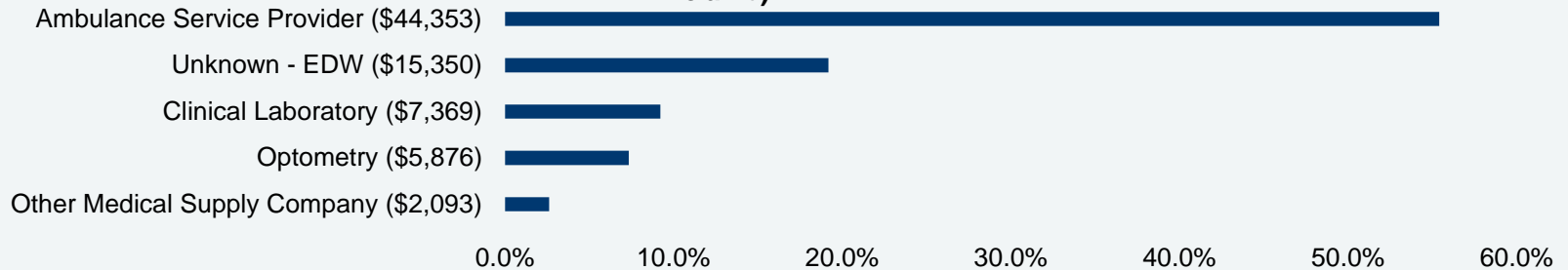
Anthem's network performance

- › 99.2% of paid claims were paid in-network
- › Network discounts totaled 53.8%
- › Member cost share was 7.5%

Medical Paid Amounts and Plan Savings

Charges Submitted	\$39,287,547
Covered Expense	\$35,600,359
Discount Amount	\$19,082,419
Allowed Amount	\$16,517,939
Employer Paid Amount	\$15,274,346

Specialty Care OON As a Percent of Total (Sorted by Top Five OON Paid Amount)



Net Payments

Network Status	Inpatient	Outpatient	Professional
In-Network	\$3.0M (99.5%)	\$5.1M (100.1%)	\$7.0M (98.5%)
Out-of-Network	\$16.7K (0.5%)	-\$2.7K (-0.1%)	\$109.8K (1.5%)
Total	\$3.0M	\$5.1M	\$7.1M
Total Discount Percentage = 53.8%			

* Based on claims where the employer plan is primary

Emergency Department Appendix



Emergency Department



Top ED Provider Information

Facility Name	ER Visits	Claims Amount
ELLIOT HOSPITAL	199	\$424,271
CATHOLIC MEDICAL CENTER	96	\$277,530
CONCORD HOSPITAL	26	\$82,686
PARKLAND MEDICAL CENTER	26	\$47,728
SOUTHERN NH MEDICAL CENTER	15	\$22,537
EXETER HOSPITAL	6	\$14,003
SPEARE MEMORIAL HOSPITAL	5	\$9,723
MARY HITCHCOCK MEMORIAL HOSPITAL	2	\$8,337
HCA HEALTH SERVICE OF FLORIDA I	1	\$8,209
LAHEY CLINIC HOSPITAL INC	2	\$7,910
ADVENTIST HEALTH SYSTEM SUNBELT	2	\$6,896
MONADNOCK COMMUNITY HOSPITAL	6	\$6,841
SARASOTA COUNTY PUBLIC HOSPITAL	1	\$6,466
NEWTON WELLESLEY HOSPITAL	1	\$6,026
PORTSMOUTH REGIONAL HOSPITAL	6	\$5,019

Top Ten By Paid Amount

	Paid Amount
Chest Pain	\$66,774
Abdominal Pain	\$40,468
Appendicitis	\$40,724
Syncope and Collapse	\$36,130
Headache	\$31,181
Gallbladder Obstruction	\$24,153
Migraine	\$31,066
Pulmonary Embolism	\$14,371
Nausea and Vomiting	\$13,973
Kidney Stone	\$13,937

Top Five By Reason For Visit

	Visit Count
Chest Pain	28
Headache	12
Syncope and Collapse	11
Gastroenteritis	8
Migraine	7



Summary

- Total spend: Employees \$414,932; Spouse \$347,868; Child \$211,824

Day Of Week	Visit Count	Paid Amount
Monday	77	\$181,876.86
Tuesday	77	\$187,412.22
Wednesday	46	\$112,598.94
Thursday	60	\$98,211.44
Friday	56	\$161,445.33
Saturday	61	\$107,631.46
Sunday	70	\$125,448.66
Total	447	\$974,624.91

Visit Frequency	Claimants	Claims Amount	Amount Per Claimant	Amount Per Visit
1	263	\$566,996	\$2,156	\$2,156
2	62	\$266,605	\$4,300	\$2,150
3	10	\$87,918	\$8,792	\$2,931
4	5	\$36,073	\$7,215	\$1,804
5	2	\$20,636	\$10,318	\$2,064

Avoidable Emergency Visits

Primary Diagnosis	Unique Claimants	Visit Count	Total Claims Amount
HEADACHE	11	11	\$25,338
MIGRAINE	7	7	\$22,252
NAUSEA AND VOMITING	8	8	\$16,750
DORSALGIA	7	7	\$16,153
DISTURBANCES OF SKIN SENSATION	6	6	\$15,488
NONINFECTIVE GE & COLITIS	8	8	\$14,819
DISORDERS OF VESTIBULAR FUNCTION	4	4	\$12,542
JOINT DISORDER NEC	4	4	\$12,104
VOLUME DEPLETION	2	3	\$10,769
SOFT TISSUE DISORDERS NEC	6	6	\$10,071
FEVER	4	4	\$9,645
INJ AB LW BACK PELV EXT GEN	5	6	\$7,203
FLU D/T OTH ID INFLUENZA VIRUS	6	6	\$6,324
OPEN WOUND OF WRIST HAND & FINGERS	7	7	\$6,067
ACUTE UP RESP INFECTION MX SITE	7	7	\$5,537
CELLULITIS AND ACUTE LYMPHANGITIS	3	6	\$5,440
COUGH	4	4	\$5,042
ANXIETY DISORDERS	3	3	\$4,826
DISLOC SPRAIN JNT LIG ANK FOOT TOE	3	3	\$3,975
ADVERSE EFFECTS NEC	3	3	\$3,292

Member Relationship	Total Claims Amount
Child/Other Dependent	\$158,993
Employee/Self	\$168,862
Spouse/Partner	\$111,522
	\$439,376

Top Provider by Visit Count

Provider	Visit Count	Total Claims Amount
ELLIOT HOSPITAL	87	\$144,473
CATHOLIC MEDICAL CENTER	37	\$61,547
CONCORD HOSPITAL	16	\$25,773
PARKLAND MEDICAL CENTER	13	\$16,571
EXETER HOSPITAL	5	\$13,529
SOUTHERN NH MEDICAL CENTER	8	\$9,784
PORTSMOUTH REGIONAL HOSPITAL	4	\$4,101
FRANKLIN REGIONAL HOSPITAL	2	\$3,527
MONADNOCK COMMUNITY HOSPITAL	5	\$3,379
ST JOSEPH HOSPITAL	4	\$2,871

Neoplasms - Malignant

\$1.6M

in plan expense

11%

of medical spend

86

unique claimants

\$47.13

PMPM

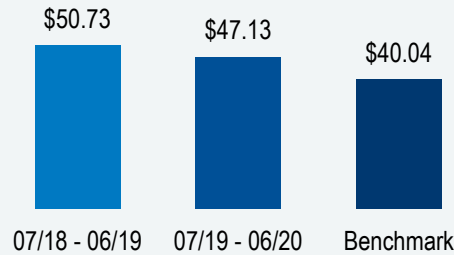
↓ 7%

PMPM trend

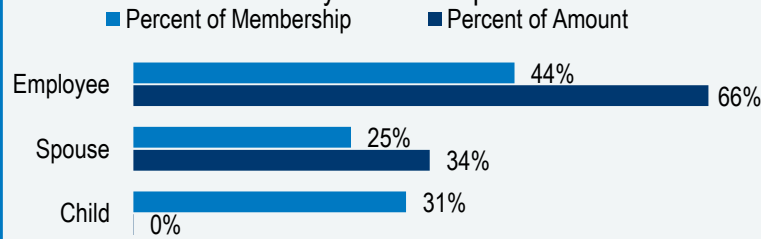
28.6%

HCC Cost**

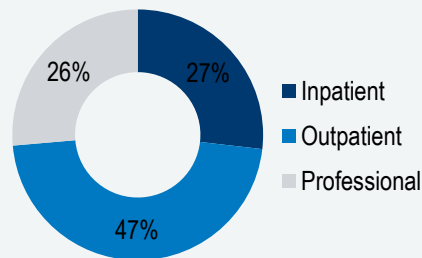
PMPM



Membership and Paid Amount
by Relationship



Cost by Setting



Neoplasms - Malignant Summary

- PMPM ranked 1st among all health conditions and trended - 7% over the prior period

MALIGNANT NEOPLASM OF BREAST

20.0%

of health condition spend

ENCOUNTER FOR OTHER AFTERCARE

13.3%

of health condition spend

NON-FOLLICULAR LYMPHOMA

12.1%

of health condition spend

Musculoskeletal System

\$1.6M

in plan expense

10%

of medical spend

959

unique claimants

\$46.20

PMPM

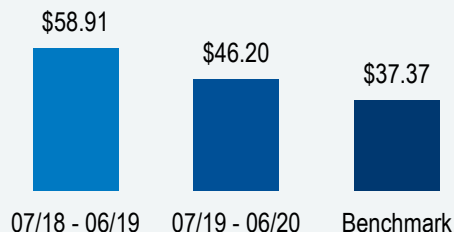
↓ 22%

PMPM trend

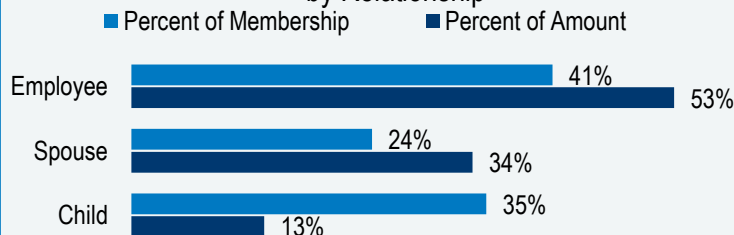
8.4%

HCC Cost**

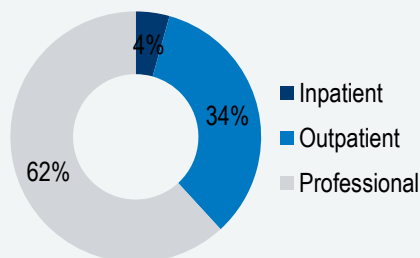
PMPM



Membership and Paid Amount
by Relationship



Cost by Setting



Musculoskeletal System Summary

- PMPM ranked 2nd among all health conditions and trended - 22% over the prior period

OTHER JOINT DISORDER NOT ELSEWHERE CLASSIFIED

16.2%

of health condition spend

OSTEOARTHRITIS OF KNEE

15.0%

of health condition spend

DORSALGIA

11.2%

of health condition spend

\$1.5M

in plan expense

10%

of medical spend

2,150

unique claimants

\$42.56

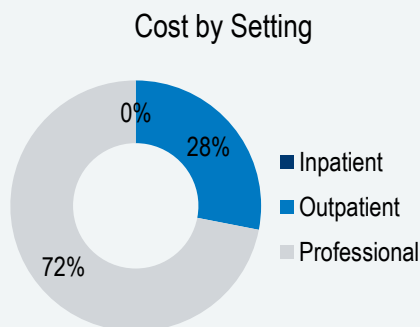
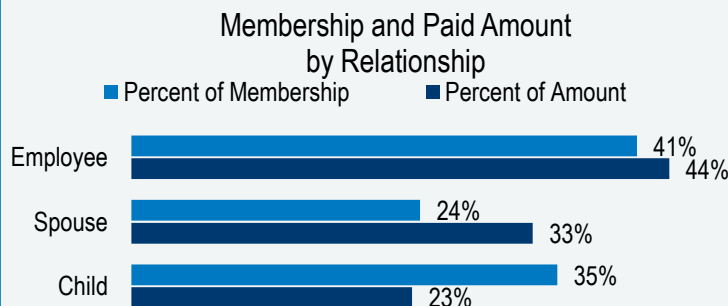
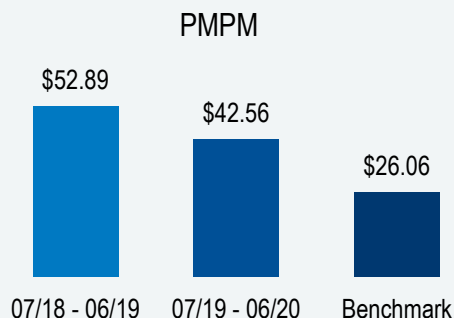
PMPM

↓ 20%

PMPM trend

0.0%

HCC Cost**



Health Status Summary

- PMPM ranked 3rd among all health conditions and trended - **20%** over the prior period

ENCOUNTER GEN EXAM W/O COMPLAINT SPCT/REPORTD DX

34.4%

of health condition spend

ENCOUNTER FOR SCREENING FOR MALIGNANT NEOPLASMS

28.3%

of health condition spend

ENCOUNTER OTH EXAM W/O COMPLAINT SUSPCT/REPRT DX

9.7%

of health condition spend

III-Defined Conditions

\$1.3M

in plan expense

8%

of medical spend

1,170

unique claimants

\$37.51

PMPM

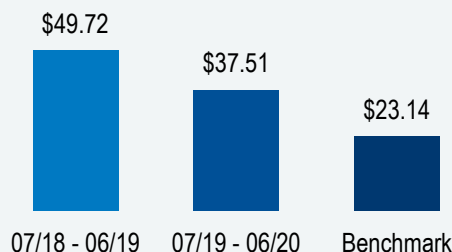
↓ 25%

PMPM trend

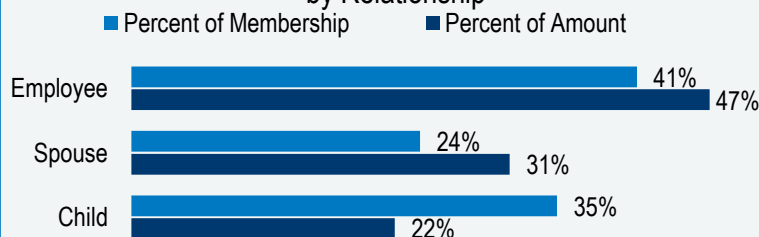
2.6%

HCC Cost**

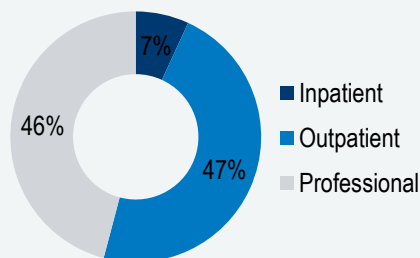
PMPM



Membership and Paid Amount by Relationship



Cost by Setting



III-Defined Conditions Summary

- PMPM ranked 4th among all health conditions and trended - 25% over the prior period

ABDOMINAL AND PELVIC PAIN

13.4%

of health condition spend

PAIN IN THROAT AND CHEST

11.1%

of health condition spend

ABNORMALITIES OF BREATHING

6.1%

of health condition spend

Digestive System

\$1.0M

in plan expense

7%

of medical spend

330

unique claimants

\$29.21

PMPM

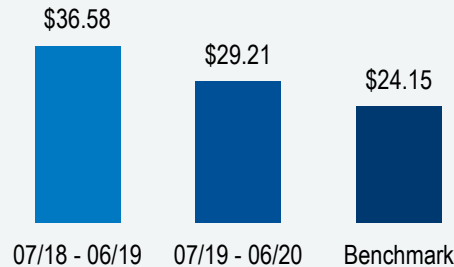
↓ 20%

PMPM trend

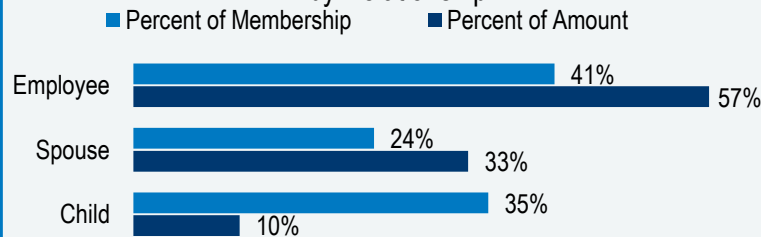
5.5%

HCC Cost**

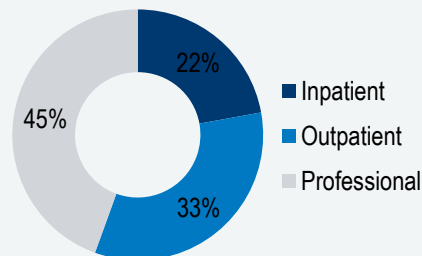
PMPM



Membership and Paid Amount
by Relationship



Cost by Setting



Digestive System Summary

- PMPM ranked 5th among all health conditions and trended - **20%** over the prior period

DIVERTICULAR DISEASE OF INTESTINE

17.8%

of health condition spend

CHOLELITHIASIS

13.4%

of health condition spend

ULCERATIVE COLITIS

11.6%

of health condition spend

WELLNESS APPENDIX



What is LiveHealth Online?

At home or on the go, access LiveHealth Online via smart phone, tablet or computer

- Video visit with a board-certified doctor, psychiatrist, or licensed therapist
 - See a medical doctor 24/7 from anywhere in the US – no appointment needed!
 - Feeling anxious about talking to someone? Video visit with a licensed therapist within days of scheduling
 - Consult a psychiatrist within weeks of scheduling to get medication support to help you manage a mental health condition
- Great opportunity to save time and money through telemedicine!

The LiveHealth Online app is available on both iOS and Android



Solera – Diabetes Prevention Program

Anthem Blue Cross and Blue Shield is pleased to provide a benefit for qualified Anthem members.

It's a 16-week healthy lifestyle program, followed by monthly sessions for the balance of a year. The program can help you lose weight, adopt healthy habits, and reduce your risk of developing diabetes. And it's available at no cost to you if you qualify.

Those who have participated report greater energy, more positive outlook, and overall better health.

Note: this program will be discontinued and replaced with Lark DPP starting on 1/1/2021.

Participants select from online or in-person programs which include the following elements:



Personal health coach



Weekly lessons



Small group for support



Tools like wireless scales and/or activity trackers

solera4me.com/cityofmanchester



Health Condition Descriptions

AFTERCARE (ICD-10: Z51)

Definition: Encounter for other aftercare (typically cancer).

Examples: Chemotherapy, radiotherapy, immunotherapy.

BEHAVIORAL HEALTH DISORDERS (ICD-10: F01-F99 excluding F49)

Definition: Illness caused by psychiatric or psychological conditions.

Examples: Drug and alcohol abuse, anorexia nervosa, bulimia, depression, paranoia, schizophrenia.

CANCER SCREENINGS (ICD-10: Z08, Z12)

Definition: Screening for cancer and cancer precursors in asymptomatic individuals so that early detection and treatment can be provided for those who test positive for disease.

Examples: Colon cancer screening, breast cancer screening, prostate cancer screening.

CIRCULATORY SYSTEM (ICD-10: I00-I02, I05-I15, I20-I28, I30-I52, I60-I89, I95-I99)

Definition: Illness caused by heart and blood vessel disorders.

Examples: High or low blood pressure, hemorrhoids, varicose veins, heart attack, heart valve disease, stroke, aneurysm.

CONGENITAL ABNORMALITIES (ICD-10: Q00-Q07, Q10-Q18, Q20-Q28, Q30-Q45, Q50-Q56, Q60-Q99)

Definition: Congenital malformations, deformations and chromosomal abnormalities .

Examples: Cleft palate and/or lip, Down's syndrome, hydrocephalus, congenital cataracts, abnormal fetal development of the eyes, ears, nose, face, heart, lungs, etc.

DIGESTIVE SYSTEM (ICD-10: K00-K14, K20-K31, K35-K38, K40-K46, K50-K52, K55-K68, K70-K77, K80-K87, K90-K95)

Definition: Illness caused by disorders of the teeth, mouth, jaw, salivary glands, esophagus, stomach, intestine, rectum, gallbladder, and liver.

Examples: Dental cavities, ulcers, appendicitis, hernias, noninfectious colitis, anal fissure, gall stones, cirrhosis of the liver.

DISEASES OF THE BLOOD (ICD-10: D50-D53, D55-D78, D80-D89)

Definition: Diseases of the blood and blood-forming organs and certain disorders involving the immune mechanism .

Examples: Anemia, hemophilia, blood and spleen disorders.

DISEASES OF THE EAR (ICD-10: H60-H62, H65-H75, H80-H83, H90-H95)

Definition: Disease of the auditory and mastoid processes.

Examples: Otitis media, hearing loss, middle ear mastoid

DISEASES OF THE EYE (ICD-10: H00-H05, H10-H11, H15-H22, H25-H28, H30-H36, H40-H44, H46-H47, H49-H57, H59)

Definition: Disease of the visual sensory and adnexa processes.

Examples: Retinal detachments and breaks, glaucoma, cataracts, corneal scars and opacities

ENDOCRINE/METABOLIC (ICD-10: E00-E13, E15-E16, E20-E36, E40-E46, E50-E68, E70-E89)

Definition: Endocrine - illness caused by increased, decreased, or imbalanced hormones. Metabolic - illness caused by the body's inability to turn food into energy.

Examples: Thyroid disease, diabetes, parathyroid disease, ovarian and testicular hormonal disease, vitamin and mineral excess or deficiency, obesity.

GENITOURINARY SYSTEM (ICD-10: N00-N08, N10-N23, N25-N53, N60-N65, N70-N77, N80-N99)

Definition: Illness caused by disorders of the kidney, bladder, prostate, testes, breast, ovaries, and uterus.

HEALTH STATUS (ICD-10: Z00-Z04, Z18, Z20-Z23, Z28, Z30, Z40-Z49, Z52-Z53, Z55-Z57, Z59-Z60, Z62-Z93, Z95-Z99)

Definition: Occasions when circumstances other than a disease or injury exists that are not classifiable to the other ICD-9 OR ICD-10 categories. This occurs in one of two ways: 1) when a person is not currently sick but encounters health services for some specific purpose, such as organ donation, vaccination, or to discuss a problem which itself is not an injury or disease; 2) some circumstance or problem is present which influences the persons health status but it is not a current illness or injury.

Examples: General medical exam, contraceptive management, personal history of disease, post-procedural aftercare

ILL-DEFINED CONDITIONS (ICD-10: R00-R23, R25-R94, R97, R99)

Definition: This classification will be utilized when 1) cases for which no more specific ICD-10 diagnosis code can be made even after all of the facts bearing on a case have been investigated; 2) signs or symptoms existing at the time of the initial visit proved to be short term, and the cause has not or could not be determined; and 3) the symptoms represent important medical problems, and the physician desired to classify the symptom and an additional ICD-10 diagnosis code.

Examples: 'Symptoms' include fainting, convulsions, fever, edema, headache, shock, chest pain, nausea, etc. 'Signs' include nonspecific abnormal blood tests, urine tests, x-rays, EEG, EKG, etc. 'Ill-defined conditions' include senility, crib death, nervousness, etc.

INFECTIOUS/PARASITIC (ICD-10: A00-A09, A15-A28, A30-A99, B00-B10, B15-B20, B25-B83, B85-B97, B99)

Definition: A disease caused by bacteria, germs, virus, or parasites (e.g., worms, ticks). The illness may be contagious.

Examples: Infectious diarrhea, chicken pox, measles, herpes, viral hepatitis, bacterial meningitis, food poisoning, blood poisoning, tuberculosis, AIDS.

INJURY & POISONING (ICD-10: S00-S99, T07, T14-T88)

Definition: Injury, poisoning and certain other consequences of external causes.

Examples: Procedural complications, dislocations & sprains, fractures, open wounds.

INJURY & POISONING - EXTERNAL (ICD-10: E000-E019, E029, E030, E800-E807, E810-E838, E840-E857, E860-E876, E878-E888, E890-E907, E909-E960, E962-E989, E991-E999)

Definition: External causes of morbidity.

Examples: Burns, falls, transportation accidents.

Health Condition Descriptions

MATERNAL COMPLICATION OF PREGNANCY (ICD-10: O10-O16, O20-O48, O60-O77, O85-O92, O94, O98, O99, O9A)

Definition: Pregnancy, childbirth and the puerperium.

Examples: Abnormality of pelvic region, perineal laceration during delivery, obstetric trauma.

MATERNAL OUTCOME OF DELIVERY (ICD-10: O00-O08, O80-O82, Z37, Z3A)

Definition: Pregnancy, childbirth and the puerperium/Factors influencing health status and contact with health services.

Examples: Full-term uncomplicated delivery, ectopic pregnancy, hydatidiform mole.

MUSCULOSKELETAL SYSTEM AND CONNECTIVE TISSUES (ICD-10: M00-M02, M05-M19, M1A, M20-M27, M30-M36, M40-M43, M45-M51, M53-M54, M60-M63, M65-M67, M70-M96, M99)

Definition: Illness caused by disorders of the joints, muscles, ligaments, and bone (excluding fractures).

Examples: Arthritis, back pain, bursitis, ganglions, bunions.

NEOPLASMS, BENIGN (ICD-10: D10-D36, D3A)

Definition: A tumor or cell growth that does not spread beyond its origin (non-Cancer).

Examples: Benign neoplasm of meninges (brain), benign neoplasm of colon, leiomyoma of uterus.

NEOPLASMS, MALIGNANT (ICD-10: C00-C26, C30-C41, C43-C49, C4A, C50-C58, C60-C79, C7A, C7B, C80-C96, D00-D09)

Definition: A tumor or uncontrolled cell growth (Cancer).

Examples: Hodgkin lymphoma, lymphoid leukemia, malignant neoplasm of breast, multiple myeloma.

NEOPLASMS, UNCERTAIN/UNSPECIFIED (ICD-10: D37-D49)

Definition: A tumor or uncontrolled cell growth whose behavior is unknown or not specified.

NERVOUS SYSTEM (ICD-10: G00-G14, G20-G26, G30-G32, G35-G37, G40-G47, G50-G65, G70-G73, G80-G83, G89-G99)

Definition: Nervous system - illness caused by brain, spinal cord, and nerve disorders. Sense organs - illness caused by disorders of the eyes and ears.

Examples: Migraine headache, meningitis, encephalitis, Alzheimer's disease, Parkinson's disease, cerebral palsy, muscular dystrophy, quadriplegia, epilepsy, cataract, retinal detachment, glaucoma, color blindness, otitis media, hearing loss.

NEWBORN INITIAL RECORD (ICD-10: Z38)

Definition: Code used to designate the birth of a newborn infant.

NON-CANCER RELATED SCREENING AND TESTING (ICD-10: Z09-Z11, Z13-Z17, Z32)

Definition: Diagnostic codes related to the treatment of various (non-cancer) diseases and conditions.

Examples: Genetic carrier testing, pregnancy testing, infectious and parasitic disease testing.

PROCREATIVE MANAGEMENT (ICD-10: Z31)

Definition: Services related to the treatment of infertility.

RESPIRATORY SYSTEM (ICD-10: J00-J06, J09-J18, J20-J22, J30-J47, J60-J70, J80-J86, J90-J99)

Definition: Illness caused by nose, larynx, bronchus, and lung disorders.

Examples: Common cold, laryngitis, tonsillitis, deviated nasal septum, viral pneumonia, emphysema, asthma, lung disease.

SHORT GESTATION, LOW BIRTH WEIGHT (ICD-10: P07)

Definition: Services related to the occurrence and care of a low birth weight infant.

SUPERVISION OF PREGNANCY (ICD-10: O09, Z33-Z34, Z36, Z39)

Definition: Services related to pregnancy and related care.

Examples: Supervision of normal pregnancy, supervision of high risk pregnancy, postpartum care and examination.

TRANSPLANT EXCLUDES COMPLICATIONS (ICD-10: Z94)

Definition: Care related to the identification, preparation, and surgical removal of a healthy organ from one person and its transplantation into another person whose organ has failed or was injured.

Examples: Heart transplant, kidney transplant, bone marrow transplant, liver transplant.